

APPLICATION FORM FOR THE REGISTRATION OF PRIVATE SECURITY AGENCIES

1. Name of Applicant :-
2. Name of the Establishment :-
3. Address and Telephone No :-
4. Date of/intended date for commencement of business (If already registered, state registration number) :-.....
5. Nature of Business (Single/joint/Limited Liability Co:-.....
6. Registered number of Business and date (if really operating):-.....
7. Addresses and Telephone No of Proprietor's/Director's :-.....
8. Name of Security Manager of Establishment and address with details (as to his/her experience)
.....
9. Number of persons employed/to be employed as
 - (a) Senior Security Supervisor:-
 - (b) Junior Security Officer (Security Guards) :-
 - (c) Others :-
10. Levels of training for persons mentioned in item 9 above:-
11. Are uniforms made according to the guide lines set out in the Security Manual of the Ministry of Defence:-
12. The details of the firearms and other security equipment in the possession of the establishment
.....
Firearms
 - (a) Shot guns:-.....
 - (b) Repeaters:-.....
 - (c) Pistols:-.....
 - (d) Revolvers:-.....
 - (e) Rifles:-.....
 - (f) Others(E.g Air guns, Air Rifles):-.....
security equipment
 - (a) :-.....
 - (b) :-.....
 - (c) :-.....
13. Details of Vehicles used for :-.....
 - (a) Providing security :-.....
 - (b) Transport of cash:-.....
14. Details of institutions to which security service are being provided/are to be provided (public,Corporation,Private):-.....
15. Nature of the services provided or to be provided (Security/Transport of cash):-.....
.....

I do hereby certify that the foregoing information declared by me, id to the best of my knowledge and belief true and accurate. I am aware that if anything declared by me is proved to be false or incorrect. I will be liable to be punished.

I herewith annex a clearance certificate obtained from the Assistant Superintendent of Police of the area in which I reside.

I also annex a clearance certificate relating to the Security Manager obtained from the Security Manager obtained from the Assistant Superintendent of Police of the area in which he resides.

Name of Applicant :-
Date :-
Signature of Applicant

REGULATION OF PRIVATE SECURITY AGENCIES ACT NO 45 OF 1998
FROM "B"
DECLARATION

I.....OF.....
(name in full) (postal address)
being the proprietor/Owner/Security Manager of
(name of security Agency)

Situated atdo hereby declare that I will,
(address of the Security Agency)
without any restriction or reservation comply with the requirements set out by the Commissioner of Labor with regard to matters connected with wages, conditions of employment, compensation or any other benefits to which employees in the security trade are entitled to,or any directions or instruction issued by him in that behalf.

Name of Applicant :-
Date :-
Signature of Applicant

REGULATION OF PRIVATE SECURITY AGENCIES ACT NO 45 OF 1998
FROM "C"
CERTIFICATE OF REGISTRATION AND ANNUAL LICENCE

This is to certify that the under- mentioned private Security Agency is registered with the Ministry of Defence and is hereby authorized to provide security services during period 20.....to 20.....

Name of Agency :-.....
Address :-.....
The Registration Number of Agency :-
Name of Proprietor/Director :-

.....
(signature)
Competent Authority

Ministry of Defence,
No.15/5, Baladaksha Mawatha,
Colombo 03.