

Save \$5 by sending your application by Internet (in French only)

The information required in the form is necessary to process your application. All confidential information will be kept confidential except to the extent provided by the laws administered by the Commission des transports du Québec. The information may be released to another public body, if applicable, under an agreement for this purpose under the terms of the Act respecting access to documents held by public bodies and the protection of personal information.

IMPORTANT

- Only legal person not established or not carrying on a business in Québec and natural person may use the English version of the form.

CTQ use only

Numéro de demande :

Numéro de revenu :

Numéro d'intermédiaire :

1 – Identification

Business

Business name

Other name under which you do business, if applicable.

Individual Male Female

Last name Given name

Other name under which you do business, if applicable.

Enter the numbers requested or check the boxes corresponding to your situation:

Québec enterprise number – NEQ

or

I do not have to be registered with the Registraire des entreprises (REQ).

Employer number – CNESST

or

I do not have any employees in Québec.
 I have employed at least one worker in Québec since
 Year Month Day .
 He or she is not an administrator, manager or owner of the business.
 Register me as an employer with the Commission des normes, de l'équité, de la santé et de la sécurité du travail (CNESST). I consent to the disclosure of my personal information as required for my registration and I authorize you to receive my employer number.

Business address (If you do business from your home, this address becomes your business address).

Number Street Apartment

City, village or municipality Province or State Postal code

Area code Telephone Extension Area code Cell Area code Fax*

E-mail address *

* I accept to receive all documents that may be sent to me at the e-mail address or at the fax number mentioned above and I agree to advise the Commission des transports of any change.

Québec representative

If your business address is located outside of Quebec and you do business in Québec, you must furnish the name and address of your Québec representative.

Name

Number

Street

Apartment

City, village or municipality

Québec
Province

Postal code

Area code Telephone

Extension

Area code Cell

Area code Fax*

E-mail address *

* I accept that my Québec representative receives all documents that may be sent to me at the e-mail address or at the fax number mentioned above and I agree to advise the Commission des transports of any change.

2 – Intermediary number

3 – Fines

Do you have any unpaid fines levied under the Act respecting owners, operators and drivers of heavy vehicles, the Transport Act and the Highway Safety Code?

No Yes

4 – Indictable offences and criminal offences

Have you been found guilty in the past 5 years of an indictable offence related to the performance of transport service intermediary activities, or have you been found guilty in the past 3 years of a criminal offence related to the use of a heavy vehicle?

No Yes

5 – Safety rating

Do you have an « unsatisfactory » safety rating imposed under the Act respecting owners, operators and drivers of heavy vehicles?

No Yes

