

BORDER CARDS: NEXUS

ORDER FORM

P.O. BOX 27060 MASONVILLE PO, LONDON, ON N5X 3W0

PHONE OR TEXT: 1-519-800-3707

FAX: 1-519-790-1070

EMAIL: INFO@NEXUSCARDAPPLICATION.COM

INSTRUCTIONS		NEXUS PACKAGE CHECKLIST		
A. Fill one NEXUS form per person, detailing address and job history for past five years, including gaps.		Include the following documents in your NEXUS package		
B. Make clear copies of valid citizenship and ID documents (e.g. passport, birth certificate, PR card, driver's license).		 NEXUS APPLICATION FORM completed and signed - all forms must be included, even if blank 		
C. Complete this order form, ensuring all 'NEXUS Package Checklist' requirements are met.		BORDER CARDS ORDER FORM (this page) - applications submitted without this form will not be		
D. Submit your completed package using methods.	one of the recommended	processed 		
1. FAX: 519-790-1070		- i.e. passport, citizenship certificate, birth certificate, etc.		
2. SCAN AND EMAIL: Subject Line: Yo info@nexuscardapplication.	com	COPY OF VALID ADMISSIBILITY DOCUMENT - i.e. passport, PR card, work/study permit, etc.		
3. MAIL: Please send us mail, either regular or with tracking.		COPY OF VALID DRIVERS LICENSE		
BORDER CARDS: 60 NORTH CENTRE RD		- if applicable		
P.O. BOX 27060 LONDON, ON, CA N5X 3W0		COPY OF FRONT AND BACK OF EXPIRING NEXUS CARD		
Note: Our PO BOX doesn't accept signatur	e on delivery.	- renewals only		
USD \$220 USD \$70 Service fees USD \$50 government fees The government fee is non-refundable 50% off service fees for additional family member USD \$100 additional service fee * Urgent appointments are provided upon conditional approval of your application, through our cancellations list. The review process can't be expedited.	before the expiry date on thei privileges for twenty-four me expiration. Therefore, please expires to avoid losing your particle. - One-step interview at all Non the US side of the on the US side of the Two-step interview at all Non Canada (Airports and the Lan-AVERAGE PROCESSION. * The review process can't be experience.	* Once you have been conditionally approved, we will contact you to schedule an interview; you must schedule this interview within 30 days of approval * Once you have been conditionally approved, we will contact you to schedule an interview; you must schedule this interview within 30 days of approval * Once you have been conditionally approved, you must schedule an interview; you must schedule this interview within 30 days of approval * Once you have been conditionally approved, we will contact you to schedule an interview; you must schedule this interview within 30 days of approval * Once you have been conditionally approved, we will contact you to schedule an interview; you must schedule an interview; you must schedule this interview within 30 days of approval		
CREDIT CARD IN	FORMATION	DISCLAIMER		
By signing below I agree to be charged the applicable service fees to the credit card I have provided. We accept Visa, Mastercard, Amex, and bank drafts (call for this method) as acceptable methods of payment Cardholder Name		By signing below applicant agrees to all of the following conditions * I assert that I have read and agreed to the terms and conditions as listed on http://nexuscardapplication.com/terms/ * Border Cards is not responsible for applications lost in the mail or improperly submitted by email or fax * Border Cards is not responsible for applications that are denied		
		* Border Cards is not responsible for delays caused by incomplete applications		
Card Number		* Basic service fees are non-refundable once applications are submitted to the government		
		* Expedited service fees are refunded only if we can't offer you an interview date within 21 calendar days from conditional approval of your application		
Expiry Date CVV	Code	The government fee is non-refundable, if it has already been paid to the government. *I assert that I understand I am using Border Cards to apply for my NEXUS card		
		* I agree to being charged the total fees according to the service I have selected to the credit card provided.		
Billing Address Card	holder Signature	* If I opt for expedited service, by signing this form I authorize you to charge me the expedited fee.		
		* I understand that cancellation of this service after my order is received by Border Cards will bear a minimum cancellation fee of \$42.50. Applicant's Name: Sign here:		

NEXUS APPLICATION

Reason for application: First time applicant Reapplication (Denied/Revoked) Renewal - Please provide your PASS ID:						
PERSONAL INFORMATION						
Surname/Last name:	Given/First n		Middle Name:		Nicknam	ne:
Date of Birth (yyyy/mm/dd):	City of Birth:		Country of Birth:		State/Pro	ovince of birth:
Full Name at Birth:					Gender:	
					Male	Female her Gender Identity
Have you used any other nan	nes before? (Mai	riages, legal name	changes, etc.): (Yes	○ No		
Other First Names:					Eye color	
Other Last Names:					Height:	
Home phone:	M	lobile phone:	Ŋ	Nork phone):	
E-mail address:						
Are you a US citizen? Ye	s O No					
Are you a permanent residen	_	Yes No				
Are you a citizen of Canada	0					
If you are neither US or Cana	dian citizen, plea	ase specify your citi	zenship:			
PREFERRED INTERVIEW LOCATION						
Interviews take place at t	the following l	ocations only:				
CANADA - two-step	Alberta	Manitoba	Ontario	Quebec		Nova Scotia
interview	Calgary	Winnipeg	Buffalo-Ft. Erie	Mont	real	Goffs (Halifax
British Columbia	Edmonton		☐ Toronto airport			Airport)
Vancouver airport			Ottawa			New Brunswick Belleville/
			Lansdowne			Houlton
UNITED STATES - North Dakota Minnesota Michigan New York Maine						
one-step interview	Pembina	International	Detroit		nplain	Calais
Washington M	ontana	Falls	Port Huron		ra Falls	Houlton
☐ Blaine ☐	Sweetgrass	Warroad	Sault Ste. Marie	Ogde	nsburg	Vermont
						Derby Line
Additional						
Notes:						

			DOCUMENT	CHECKLIST		
I have the following documents and I will provide PHOTOCOPIES:						
	Document number	Country o	f Issuance I	Name as it appears on tl	he document	Expiry date (yyyy/mm/dd)
Passport						
	Document number	Country o	f Issuance I	Name as it appears on tl	he document	Expiry date (yyyy/mm/dd)
Passport (2)						
(=)						
Citizenship	Document number	Country o	f issuance	Name as it appears on tl	ne document	Expiry date (yyyy/mm/dd)
☐ Document						
Type of docu	ıment:					
	Document number	Country of	f Issuance N	Name as it appears on th	ne document	Expiry date (yyyy/mm/dd)
Birth Certificate						
_						
Permaner	nt resident status (for applic	ants who are n	not citizens of Car	nada or the US)	
Permanen	Document number	Country o	f Issuance N	Name as it appears on th	ne document	Expiry date (yyyy/mm/dd)
resident card						
If applica	ble, please provide	your visc	a or work perm	nit details		
Visa	Document number	Туре	Country of Issuance	e Name as it appears	on the document	Expiry date (yyyy/mm/dd)
Work permi	t					
	Document number	Туре	Country of Issuance	e Name as it appears	on the document	Expiry date (yyyy/mm/dd)
Visa Work permi	t					
				_		
Do you currently hold a valid Driver's License? O Yes O No (*If YES, please provide a photocopy)						
Driver's license number: Name as it appears on the document:						
Evniry date	(\nan/\mm/dd):	Cour	try of issuance:		Province/State:	
Expiry date	(yyyy/mm/dd):	Coun	itry of issuance.			
Is this an enhanced driver's license (EDL)?						
(An enhanced driver's license is a driver's license that has been enhanced to denote both identity and citizenship. An EDL will include a flag icon identifying the license-holder's citizenship)						
Is this a a commercial driver's license?						
Is there a HAZMAT (hazardous material) endorsement on the CDL? O Yes No						

ADDRESS INFO Please provide the last 5 YEARS of your residential history leaving no gaps Current residential address: From (YYYY/MM) To present Street number Street name Apt. number Province/State City P.O. Box Number Postal/Zip code Country Is your mailing address same as your Residential address? O Yes O No If **not**, please provide your current mailing address below: From (YYYY/MM) To present Street number Street name Province/State City Apt. number P.O. Box Number Postal/Zip code Country **Previous address (if applicable):** From (YYYY/MM) To (YYYY/MM) Address: **Previous address (if applicable):** From (YYYY/MM) To (YYYY/MM) Address: **Previous address (if applicable):** From (YYYY/MM) To (YYYY/MM) Address: **Previous address (if applicable):** From (YYYY/MM) To (YYYY/MM) Address: **Previous address (if applicable):** From (YYYY/MM) To (YYYY/MM) Address: **Previous address (if applicable):** From (YYYY/MM) To (YYYY/MM) Address: **Previous address (if applicable):** From (YYYY/MM) To (YYYY/MM) Address:

EMPLOYMENT INFO

Please provide the last 5 YEARS of your employment history leaving no gaps. Please specify the periods you were unemployed or a student. **Current employment:** From (YYYY/MM) **To present** O Self-Employed Demployed Demployed Retired Student What is your occupation? Who is your employer? Street number Street name Apt. number Province/State City Postal/Zip code P.O. Box Number Country **Previous employment (if applicable)** Self-Employed Demployed Retired Student To (YYYY/MM) From (YYYY/MM) What is/was your occupation? Who is/was your employer? Employer's address: $\textbf{Previous employment (if applicable)} \ \bigcirc \ \textbf{Self-Employed} \ \bigcirc \ \textbf{Employed} \ \bigcirc \ \textbf{Unemployed} \ \bigcirc \ \textbf{Retired} \ \bigcirc \ \textbf{Student}$ From (YYYY/MM) To (YYYY/MM) What is/was your occupation? Who is/was your employer? Employer's address: **Previous employment (if applicable)** Self-Employed Demployed Retired Student From (YYYY/MM) To (YYYY/MM) What is/was your occupation? Who is/was your employer? Employer's address:

4 Previous employment (if applicable) Self-Employed Employed Unemployed Retired Student
From (YYYY/MM) To (YYYY/MM)
What is/was your occupation?
Who is/was your employer?
Employer's address:
Previous employment (if applicable) Self-Employed Employed Unemployed Student
From (YYYY/MM) To (YYYY/MM)
What is/was your occupation?
Who is/was your employer?
Employer's address:
6 Previous employment (if applicable) Self-Employed Employed Unemployed Retired Student
From (YYYY/MM) To (YYYY/MM)
What is/was your occupation?
Who is/was your employer?
Employer's address:
7 Previous employment (if applicable) Self-Employed Employed Unemployed Retired Student
From (YYYY/MM) To (YYYY/MM)
What is/was your occupation?
Who is/was your employer?
Employer's address:
Employer's address.
Previous employment (if applicable) Self-Employed Employed Unemployed Retired Student
From (YYYY/MM) To (YYYY/MM)
What is/was your occupation?
Who is/was your employer?
Employer's address:

	ADDITIONAL INFORMATION:				
Have you ever been convicted of an offence		ived a pardon? Yes \(\) No			
Have you ever received a waiver of inadmissibility to the U.S. from a U.S. government agency? Yes \ No					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Have you ever been found in violation of customs or immigration laws or other federal import laws? Yes No No No where you were convicted:					
This section is required for applicants under the age of 18 only Non-custodial adult parents or guardians must attach a copy of supporting documents such as a court order or letter of authorization if this application is for a child under the age of 18 who will be travelling with the non-custodial adult.					
Legal Guardian/Parent <i>Inform</i>					
First Name	Middle Name	Last Name			
Telephone number	E-Mail address				
Date of birth (yyyy/mm/dd)	Gender				
(7,7,7,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1	Male Female				
	O Iviale O Pelliale				
countries where you have travelled. The list doe	ble, please write NONE Canada, the United States and its territories, and Its not have to follow any order but it must include abelled as "United Kingdom". If you have visited a	all trips. Please note that visits to England,			