



Desired Position (please select one):	<input type="checkbox"/> Captain	<input type="checkbox"/> Co-Captain
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PLEASE READ INSTRUCTIONS ON REVERSE.

APPLICANT

Surname:		Given Name(s):		Maiden Name:	
Occupation:		Driver's Licence #:		Birth Date (yy/mm/dd):	
				Birth Place:	
Current Address (include city and postal code):				Since (yy/mm):	
Previous Address (if you have been at your current address for less than 5 years):			From (yy/mm):	To (yy/mm):	Languages:
Home #:	Cell #:	Work #:		Email: *mandatory*	

SPOUSE/COMMON-LAW

Surname:		Given Name(s):		Maiden Name:	
Occupation:		Driver's Licence #:		Birth Date (yy/mm/dd):	
				Birth Place:	
Previous Address (if different from Applicant):				From (yy/mm):	To (yy/mm):
				Languages:	

CO-RESIDENTS (≥ 12 yrs old)

1. Full Name:		
Birth Date (yy/mm/dd):	Relation to Applicant:	Languages:
2. Full Name:		
Birth Date (yy/mm/dd):	Relation to Applicant:	Languages:
3. Full Name:		
Birth Date (yy/mm/dd):	Relation to Applicant:	Languages:

All Captains and Co-Captains are required to undergo a Free Police Information Check. Upon completion of the application, you will receive documents for further processing.

“To remain in good standing under the Block Watch Society of BC, Captains and Co-Captains have, in addition to any local requirement for updating their PIC, a duty to disclose any negative police contact or any other incident that may reflect poorly on the Captain or Co-captain’s municipality and/or their respective police authority and/or the Block Watch Society of BC. Failure to adhere to this policy to disclose may result in immediate removal from the Block Watch program.”

SIGNATURES

We the undersigned, understand that the Royal Canadian Mounted Police retains sole discretion to approve or reject this application; that we will have opportunity to discuss any information that results in this application being rejected; and, that in compliance with the *Freedom of Information and Protection of Privacy Act* and the *Privacy Act*, no information will be disclosed without the permission of the undersigned unless provided for otherwise.

Applicant Signature:	Date (yy/mm/dd):
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Richmond Block Watch Program Application Form Instructions

Thank you for your interest in the Richmond Block Watch program. Please read these instructions carefully before completing, signing & submitting the application form as incomplete applications will not be processed.

Instructions:

- All sections of this application form must be filled out in order for your application to be considered complete. If a section of either form does not apply to you, please fill out that section with “N/A”.
- Co-residents are any individuals 12 years old or over who live in the home of the applicant. This includes children, extended family, tenants, roommates, nannies/caregivers or friends. The applicant’s spouse/Common-Law must complete the “Spouse/Common-Law” section.
- If you require additional space to list previous addresses or additional co-residents, please fill out and attach additional pages as necessary.
- Completed applications can be submitted in the following methods:

Email

blockwatch@richmond.ca

Fax

604-270-9372

Mail/Drop off at any of the following locations: (ATTN: Block Watch office)

City Centre Community Policing Office

6931 Granville Ave
Richmond, BC V7C 4M9

Richmond RCMP Detachment

11411 No. 5 Road
Richmond, BC V7A 4E8

Steveston Community Policing Office

4371 Moncton Street
Richmond, BC V7E 3A8

South Arm Community Policing Office

8880 Williams Road
Richmond, BC V7A 1G6

If you have any questions regarding this application or the Richmond Block Watch program, please contact the Crime Prevention office by telephone at 604-207-4829 or email at blockwatch@richmond.ca.