Immigroup Inc. 1180 Danforth Ave, Toronto, ON M4J 1M3 Phone: 1-866-760-2623 Fax: 416-640-2650 Email: info@immigroup.com

PERMANENT RESIDENT CARD IMMIGROUP ORDER FORM

INSTRUCTIONS

DOCUMENT CHECKLIST

Read all instructions and follow carefully 1. Please complete the order form and application forms included herein. Mato include your telephone number and email address where you can be content of include your telephone number and email address where you can be content of include your telephone number and documents in the document checklist office for review at 416-640-2650 or info@immigroup.com. 3. You will be contacted within 1 - 2 business days regarding your application have not been contacted after 2 business days, please contact our office at 1-866-760-2623 to confirm we have received your order. 4. After we have reviewed your forms and documents, we will advise you to soriginal forms and copies of documents to our office at 1180 DANFORTH AVE, TORONTO, ON M4J 1M3 5. Our office will contact you when your new PR Card is ready to confirm the and shipping method you would like to receive your PR Card by. 6. Upon receipt of your new Permanent Resident card by mail, you are required destroy your previous card. Should you be requested to present yourself at a CIC office, you must bring with you the original document matching the copy which you have included with your application. Please note that as of May 1, 2012, your PR Card may be mailed to office or your residential address at the discretion of CIC.	IMMIGROUP ORDER FORM PR CARD APPLICATION FORM (duly completed and signed) IMM 5455 FORM COPY OF ID PAGE IN YOUR CURRENT VALID PASSPORT OR COPY OF ID PAGE & IMMIGRANT STAMP / VISA PAGE OF PASSPORT AT IME OF LANDING COPY OF RECORD OF LANDING (IMM 1000) OR CONFIRMATION OF PERMANENT RESIDENCE COPY OF CURRENT, VALID OR EXPIRED PR CARD, BOTH SIDES COPY OF ALL PAGES IN ALL PASSPORTS HELD IN LAST 5 YEARS COPY OF ONE OF THE FOLLOWING: - NOTICE OF ASSESSMENT (INCOME TAX) FOR LAST 2 YEARS OR - RECORD OF MOVEMENT OR IVENTIFY OR CONTROL OUT OUT IF YOUR NAME HAS CHANGED SINCE YOUR LAST APPLICATION: MARRIAGE CERTIFICATE OR NAME CHANGE PLEASE NOTE THAT ADDITIONAL DOCUMENTATION MAY BE REQUESTED
All processing times are subject to change without notice	e. Processing is not guaranteed but at the discretion of CIC.
REGULAR FILING \$409.35 \$295 service fee \$38.35 HST (harmonized sales tax) \$26 courier fee \$50 government fees Average processing time is 3-4 months	URGENT FILING (must have proof of urgency) \$499.75 \$375 service fees \$48.75 HST (harmonized sales tax) \$26 courier fee \$50 government fees Average processing time is 20-30 business days
STATUS IN JEOPARDY \$697.50 \$550 service fees \$71.50 HST (harmonized sales tax) \$26 courier fee \$50 government fees This service must be used by persons who have been outside of canada for over 600 days in the past 5 years. Processing times vary; call for more information	TOP PRIORITY FILING (must have proof of urgency) \$641.00 \$500 service fees \$65 HST (harmonized sales tax) \$26 courier fee \$50 government fees Average processing time is 15 business days
Cardholder Name Card Number: Expiry Date: Cardholder Signature: Email:	*By signing below I assert that I have read and agreed to the terms and conditions as listed onhttp://www.immigroup.com/disclaimer.php and agree to the following conditions: *Immigroup Inc is not responsible for documents or passports lost by courier companies or any government office. *Immigroup Inc is not responsible for applications that are rejected. *All fees are non-refundable once applications are submitted to the government. *I agree to being charged the total fees corresponding with my required service *I understand that cancellation of this service after my order is received by Immigroup Inc. will bear a minimum cancellation fee of \$42.50 SIGN HERE:

1180 Danforth Ave. Toronto, ON M4J 1M3 Tel: 416-962-2623

Toll free: 1-866-760-2623 Fax: 416-640-2650

http://www.immigroup.com info@immigroup.com



Use this cover page to fax your documents for review of your application (fax to 416-640-2650)

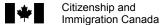
Fo:	ImmiGroup	From:
Fax:		Pages: 416-640-2650
Phone	e: 416-962-2623	Date:
Re:		CC:

PLEASE FAX THESE ITEMS

- Completed PR Card application
- Completed Immigroup order form
- Photocopy of applicant's passport
- Photocopy of existing PR card (front and back) or Landing Paper
 - Photocopy of Driver's License OR Provincial ID

If you are unable to provide any of these items, fax what you have and our office will advise you how to proceed.

The information transmitted is intended only for the named individual(s) or organization above and may contain privileged and/or confidential information. Any distribution, copying or other use of, or action taken (or not taken) on this information by anyone other than the intended recipient(s) is strictly prohibited.



APPLICATION FOR A PERMANENT RESIDENT CARD

Confused by a question? See step 2 of the instruction guide. TYPE or PRINT in black or blue ink								
Language you prefer for	or correspondence:	English	French	2	. Date you became a	perma	nent resident of Canada	(YYYY-MM-DD)
3. You are applying to (cl	neck one box):	Obtain your f	first Resident Card		new your present		Replace a lost, stolen,	, destroyed or never received
NOTE: If you are applying to renew your present card, you should keep it until you receive your replacement card. You will be asked to destroy your old card when you receive your new one. If you are applying to replace your damaged card, you must send the damaged card with your application.								
A. PERSONAL DETAILS								
4. Your full name as show	n on your Record of La	nding (IMM 10	000) or Confirmation of	Perman	ent Residence (IMM 52	92) or (l	IMM 5688).	
Family name (surname) Given name(s)								
5. Your current name, if o	Your current name, if different from above (Note: you must provide supporting documents for any change in your name. Consult "Step 1. Gather documents" in the instruction							
Family name (surname)			Given name(s)					
6. Your sex	Male	Female		7.	Your date of birth		(YYYY	(-MM-DD)
8. Your country of birth				9.	Your country of citize	enship		
10. Colour of your eyes	Blue Grey	Brow	vn Green	Black	Hazel (yellowis	sh brow	n) Other ►	
11. Your height	С	m or	ft		in		_	
12. Your current residentia	al address in Canada							
Street no. and name								
City		Pro	ovince			Pos	stal code	
13. Your mailing address i	n Canada (if different from	om above)						
Street no. and name								
City		Pro	ovince			Pos	stal code	
All correspondence will go to information, to be sent to the			e-mail address below.	Indicati	ng an e-mail address w	ill autho	rize all correspondence, in	cluding file and personal
14. Your telephone number	ers and e-mail address							
At home	Alternative	E-ma	ail					
15. Your current marital st	atus							
Never married	Married		Vidowed		Legally separated		Divorced	Common-law
Never married	Widified		vidowed	Ш	Legany Separated		Bivorceu	Common law
B. YOUR IMMIGRATION I	HISTORY							
16. Place you became a pe	ermanent resident of C	anada		_				
City/Port of entry				Pro	vince			
17. Have you ever been is a removal order in Car		No de					subsection 44(1) or made quired of Canadian perma	
C. PERSONAL HISTORY								
19. ADDRESS HISTORY: Y permanent resident	our address history fo	or the past 5 y	ears or if you became	e a perr	nanent resident less t	han five	e years ago, your address	s history since becoming a
From To (YYYY-MM)		Street and nur	mber		City or town		Province	Country
	+							



				FAGL 2 OI
C. PERSONAL HISTORY (continued)			
	TIONAL HISTORY: Your work and/or educational history for tional history since becoming a permanent resident. If you h			s than five years ago
	Name of employer or name of educational institution attended (do not use abbreviations)	City or town	Province	Country
21. TRAVEL HISTORY: Have becoming a permanent	e you travelled or lived outside of Canada in the last five yearesident)?	ars (or if you became a permane	nt resident less than five year	s ago, since
No	Yes List all your absences:			
From To				
(YYYY-MM) (YYYY-MM)	Your location during your absence (city, country)	Reason for	r absence	Number of days
			Total number of days	
		If your total equa	ls 1095 days or more, you mu	st complete Section I
D. RESIDENCY OBLIGATION	ON			
22. If you have been outsid became a permanent re	have been outside of Canada for 1095 days or more in the le of Canada for 1095 days or more, list your absences from sident less than five years ago: list absences from the time ele accompanying a family member who is a Canadian citize	Canada in the past five years in you became a permanent reside		plicable. If you
	, , , , , , , , , , , , , , , , , , , ,			
Name of family member		Provide proof of Ca	anadian citizenship.	
Relationship to you		▶ Provide proof of yo	ur relationship.	
From To (YYYY-MM)	Your address do	uring your absence		Number of days
			Total number of days	
			rotal number of days	
Option 2 - Absence whi	lle employed by a Canadian business or in the Canadian fed	eral or provincial public service		
Provide proof of ful	II-time Canadian employment			
From To (YYYY-MM)		uring your absence		Number of days
			Total number of days	

D.	RESIDENCY OBLIGATION	(continued)				
	Option 3 - Absence while federal or provincial publ					
	Name of family member	Provide proof of this person's permanent resident st person's full time employment.	atus and proof of this			
	Relationship to you	Provide proof of your relationship.				
()	From To YYYY-MM) (YYYY-MM)	Your address during your absence	Number of days			
H						
H						
		Total number of days				
E.	CONSENT TO DISCLOSE	INFORMATION				
23.	History of entries to Cana	da				
		l ox below, and by signing this form, I hereby give my consent to the Canada Border Services Agency (CBSA) to disclose the deta enship and Immigration Canada (CIC) in order to assist CIC in determining my eligibility for a permanent resident card.	ills of my history of			
	I also hereby authorize CIC	to collect the history of my entries into Canada from the CBSA.				
	Yes No					
	Note that if you do not prov processing of your applicat	ide consent, you may be asked to request your history of entries directly from the CBSA and send it to CIC which could result in ion.	delays in the			
F.	DECLARATION OF APPLI	CANT				
24.	This declaration covers the in the attached accompar	ne information that I have provided on this form and all the information submitted in my application for a Permanent Respying documents.	sident Card as well as			
	I declare that the information I have given is truthful, complete and correct.					
		y false statements or concealment of a material fact may be grounds for my prosecution or removal. osed are a true likeness of me.				
	The photographs enclI am a permanent resi					
	I am not a Canadian of	citizen.				
		regoing statements, having asked for and obtained an explanation on every point that was not clear to me. · document has been completed and signed, it will form part of my Immigration Record and will be used to verify my family details	s on future applications			
		rm Citizenship and Immigration Canada if any of the information or the answers provided in my application forms change.	on ratare applications.			
	I have included the S	SUPPLEMENTARY IDENTIFICATION FORM (IMM5455).				
	Signature of declarant					
	Date	(YYYY-MM-DD)				
	City					
	Province					
	Signature of parent or guardian, if applicable					
	Date	(YYYY-MM-DD)				
	I am the applicant's: (check appropriate box)	Mother Guardian				

G. SOLEMN DECLARATION CONCERNING A LOST, STOLEN, DESTROYED OR NEVER RECEIVED PERMANENT RESIDENT CARD

25.	Complete this section only	r if you are applying to replace a lost, stolen, destroyed or n	ever received PR Card.		
	Permanent Resident Card n	umber	Date of issue	(YYYY-MM-DD)	
	My Permanent Resident Car	d was	on or about (YYYY-MN	A-DD) at	
	Under the following circumsta	ances (full information must be provided below):			
	I have made the following eff		t raport number)		
(if applicable, indicate police authorities notified and attach a copy of police report or incident report number):					
	Should I ever regain possess	sion of my original PR Card, I promise to destroy it immediately.			
	I solemnly declare that the in	nformation I have provided is true, that is of the same force and	effect as if made under oath	, and that it was freely given. I authorize the department of	
		Canada to verify the information I have provided. I also understated the Immigration and Refugee Protection Act.	and that the provision of an	y false or misleading information may lead to prosecution in	
	_				
	Signature of declarant		Signature of parent or guardian, if applicable		
	or deciarant	(YYYY-MM-DD)	or guardian, ir applicable	(YYYY-MM-DD)	
	Date	(TTT-WIN-DD)	Date	(TTTT-WW-DD)	

The information you provide on this form is collected under the authority of the *Immigration and Refugee Protection Act* and will be used to determine whether the term and conditions of your permanent residency were maintained and whether you should be granted a Permanent Resident Card. It will be retained in the Personal Information Bank CIC PPU 067 entitled Permanent Resident Card as identified in **infosource**. It may be shared with other organizations in accordance with the consistent use of information under the *Privacy Act*. Under the *Privacy Act* and the *Access to Information Act* individuals have the right to protection of and access to their personal information. Details on these matters are available at infosource.gc.ca and through the Citizenship and Immigration Call Centre. **Infosource is also available at Public Libraries in Canada**.

Citizenship and Immigration Canada

SUPPLEMENTARY IDENTIFICATION FORM RENSEIGNEMENTS SUPPLÉMENTAIRES

FOR OFFICE USE ONLY - RÉSERVÉ À L'ADMINISTRATION
Client ID - ID du client

						Fu
					Surname Nom de famille	
					Given name(s) Prénom(s)	
				naissance	Date of birth - Date de I	Da
					Height - Grandeur	He
			ft in pi po	cm OR OU		
				es yeux	Eye colour - Couleur de	Еу
Hazel (yellowish brown) Noisette (brun jaunâtre)	Brown Brun	Black Noir	Grey Gris	Green Vert	Blue Bleu	
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			Other Autre	
Hazel (yellowish brown) Noisette (brun jaunâtre)			pi po Grey	es yeux	Blue Bleu Other	



Please read these instructions carefully. If the instructions are not followed correctly, **your application will be returned to you.** Veuillez lire ces instructions attentivement. Si vous ne suivez pas les instructions, **votre demande vous sera retournée**.

- <u>DO NOT</u> glue the picture in the box (square) below as it may damage the picture. This box is reserved for office use only. Place the photos in a small envelope and write the name of the applicant on the envelope.
- Veuillez **NE PAS** coller la photo à l'intérieur de la boîte (carré) ci-dessous, la colle pourrait l'endommager. Cette boîte est réservée à l'administration seulement. Placer les photos dans une enveloppe et écrivez le nom du demandeur sur l'enveloppe.

For office use only

Réservé à l'administration



7.	Your representative's conta	act information						
	Name of firm or organization (if applicable)							
	Mailing address							
	Postal code/ZIP							
	Telephone number	Country code Area code	Number					
		()						
	Fax number	Country code Area code	Number					
		()						
	E-mail address (if applicable)							
l	Dy indicating your represent	ativola a mail addraga vav ara k	eroby outborizing Citizanah	in and Immigration Canada to tran	amit your file and personal information to this			
	specific e-mail address.	alive's e-mail address, you are n	lereby authorizing Citizensh	np and immigration Canada to tran	smit your file and personal information to this			
8.	Your representative's decla	aration:						
		tion in Section B is truthful, comp						
	 I understand and accept Canada and Canada Bor 	that I am the person appointed der Services Agency	by the applicant to conduct	t business on the applicant or spor	nsor's behalf with Citizenship and Immigration			
	Signature of representative				Party ID (if known)			
	o.g							
	Date		(YYYY-MM-DD)					
ECT	ION C: CANCEL THE APPO	OINTMENT OF A REPRESENTA	ATIVE					
		or this person to serve as my rep nada Border Services Agency.	resentative, to receive infor	mation on my case file and to condu	uct business on my behalf with Citizenship and			
9.	Your representative's full n	ame						
	Family name (Surname)							
	Given name(s)							
	(-)							
	Name of Commence of the Commen							
	Name of firm or organization (if applicable)							
ECT	ION D: YOUR DECLARATI	ON						
10.								
		and truthfully answered all questi			for every point that was not clear to me.			
	- Taiso deciare that Thave	read and understood all the state	inents on this form, having	asked and obtained an explanation	for every point that was not clear to me.			
	Signature of applicant							
	Date		(YYYY-MM-DD)					
	Duito		,					
	Signature of spouse or co	ommon-law partner						
	(if applicable)							
	Date		(YYYY-MM-DD)					

Warning! It is a serious offence to give false or misleading information on this form.

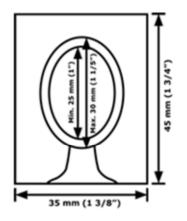
The information you provide on this form is collected under the authority of the *Immigration and Refugee Protection Act* and will be used in assessing your application according to the requirements of the Act. It will be retained in a Personal Information Bank identified in **Infosource**. The information may be shared with other organizations such as the Canada Border Services Agency (CBSA), the Royal Canadian Mounted Police (RCMP), the Canadian Security and Intelligence Service (CSIS), where there is an agreement or arrangement with a foreign government, in accordance with subsection 8(2) of the *Privacy Act*. Pursuant to the *Immigration and Refugee Protection Regulations*, the information may also be shared with a regulatory body that is responsible for governing or investigating the conduct of representatives, such as a provincial and territorial law society, the *Chambre des Notaires du Québec* and the Immigration Consultants of Canada Regulatory Council (ICCRC). Under the *Privacy Act* and the *Access to Information Act* individuals have the right to protection of and access to their personal information. Details on these matters are available at infosource.gc.ca and through the Citizenship and Immigration Call Centre. **Infosource is also available in Canadian public libraries**.

Appendix B: Photo specifications

Take this sheet with you to the Photographer

Permanent Resident Card photos are NOT the same as passport photos.

- You may wear non-tinted and tinted prescription glasses as long as your eyes are clearly visible. Make sure that your eyes are not hidden by glare on the lenses. Sunglasses are not acceptable.
- A hairpiece or other cosmetic accessory is acceptable if it does not disguise your normal appearance and you wear the accessory on a regular basis.
- The photos must clearly show your face. If you may not remove your head covering for religious reasons, make sure your full facial features are visible.
- Photos must have been taken within the last 12 months to ensure an up-to-date likeness.
- Photos may be either black and white or color.
- Your face must be square to the camera with a neutral expression, neither frowning nor smiling, and with your mouth closed.





Notes to the photographer

The two photos must:

- show a full front view of the person's head showing full face centered in the middle of the photo;
- be clear, well-defined and taken against a plain white background without shadows;
- be produced from the same un-retouched film or from the same file capturing the digital image or from two identical photos exposed simultaneously by a split-image or multi-lens camera;
- be original photos (not taken from any existing photo);
- measure between 25 mm and 30 mm (1" and 1 1/5") from chin to crown;
- have a 35 mm x 45 mm (1 3/8" x 1 3/4") finished size;
- Be on photographic paper that has a backing which accepts and retains the date. Photos without this backing are not acceptable;
- be on prints that are well-fixed and washed to prevent discoloration;
- Bear the date the photo was taken (not the date the photo was printed) directly on the back of one print (stick-on labels are not acceptable).