

IMMIGROUP INC

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

Read all instructions and follow carefully

1. Please complete your PR card application and have two PR card photos taken (see specifications attached).
2. Fax your PR card application, a copy of the identity page in your passport, copy of your current/expired PR Card, copy of your Record of Landing, copy of your driver's licence, a travel booking (if you are traveling soon), and this order form to **416-640-2650**.
3. We will call you to confirm the receipt of your fax and discuss your case. We will also mail or courier an original IMM 5455-Supplementary Identification Form. This form cannot be downloaded or printed.
4. Once you have received your IMM 5455, please sign and courier it back to us along with your PR card application package to **1180 DANFORTH AVE, TORONTO, ON M4J 1M3**
5. We will contact you once your PR card is ready for pickup.

DOCUMENT CHECKLIST

Include the following documents in your PR card package

- PR CARD APPLICATION FORM (duly completed and signed)**
- COPY OF THE IDENTITY PAGE IN YOUR PASSPORT**
- COPY OF YOUR RECORD OF LANDING**
- IMMIGROUP ORDER FORM**
- If applicable, include:*
- COPY OF CURRENT, VALID PR CARD**
- ORIGINAL EXPIRED PR CARD**
- COPY OF DRIVER'S LICENSE**
- TRAVEL BOOKING (for urgent filing)**

APPLICATIONS MISSING THIS ORDER FORM WILL NOT BE PROCESSED.

SERVICE OPTIONS

REGULAR FILING
\$331.37 \$249 service fees
 \$32.37 HST (harmonized sales tax)
 \$50 government fees

Send me the forms by courier (additional \$26)

Average processing times are 4-7 months

URGENT FILING *(must have proof of urgency)*
\$443.25 \$325 service fees
 \$42.25 HST (harmonized sales tax)
 \$50 government fees
 \$26 courier (within Canada)

Average processing times are 20-30 business days

STATUS IN JEOPARDY OR COMPLEX AMENDMENT
\$697.50 \$550 service fees
 \$71.50 HST (harmonized sales tax)
 \$50 government fees
 \$26 courier (within Canada)

This service must be used by persons who:
 - require immense changes on their immigration records(date of birth etc.), OR
 - have been outside of canada for over 850 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)
 \$50 government fees
 \$26 courier (within Canada)

Direct Contact number:

Average processing times are 15 business days
 If your PR card is not ready for pickup within that time, you will be refunded \$197.75
 We start counting from the day your original documents are received by Immigroup

CREDIT CARD INFORMATION

Cardholder Name

Card Number

Expiry Date CVV Code

Cardholder Signature:

DISCLAIMER
Applicant must sign below

*By signing below I assert that I have read and agreed to the terms and conditions as listed on <http://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

SIGN HERE:

1180 Danforth Ave.
Toronto, ON M4J 1M3
Tel: 416-96-CANADA (962-2623)
Toll free: 1-866-760-2623
Fax: 416-640-2650
<http://www.immigroup.com>
info@immigroup.com



Use this fax sheet and fax back for a review of your application
and documents (fax to: 416-640-2650)

To: Immigroup – PR card review	From:
Fax: 416-640-2650	Pages:
Phone: 416-962-2623	Date:
Re:	CC:
<input checked="" type="checkbox"/> Urgent <input type="checkbox"/> For Review <input type="checkbox"/> Please Comment <input checked="" type="checkbox"/> Please Reply <input type="checkbox"/> Please Recycle	

FAX BACK THESE ITEMS

- PR card application
- Signed invoice sheet
- Photocopy of applicant's passport
- Photocopy of existing PR card or landing paper
- Photocopy of driver's licence or health card

We will mail or courier the IMM 5455 to you (if you do not have it) once you have faxed your package to us.

C. ADDRESS, WORK AND EDUCATIONAL HISTORY FOR THE PAST FIVE YEARS (continued)

20. Your work and/or educational history for the past 5 years or if you became a permanent resident less than five years ago, your work and/or educational history since becoming a permanent resident. If you have not worked or studied, write N/A (not applicable).

From Y M	To Y M	Name of employer or name of educational institution attended (do not use abbreviations)	City or town	Province	Country

21. Have you travelled or lived outside of Canada in the last five years (or if you became a permanent resident less than five years ago, since becoming a permanent resident)?

No Yes ► List all your absences:

From Y M	To Y M	Your location during your absence (city, country)	Reason for absence	Number of days
Total number of days				

If your total equals 1095 days or more, you must complete Section D.

D. RESIDENCY OBLIGATION

Complete this section if you have been outside of Canada for 1095 days or more in the past five years.

22. If you have been outside of Canada for 1095 days or more, list your absences from Canada in the past five years in the following situations, if applicable. If you became a permanent resident less than five years ago: list absences from the time you became a permanent resident to present.

Option 1 - Absence while accompanying a family member who is a Canadian citizen

Name of family member ► Provide proof of Canadian citizenship.

Relationship to you ► Provide proof of your relationship.

From Y M	To Y M	Your address during your absence	Number of days
Total number of days			

Option 2 - Absence while employed by a Canadian business or in the Canadian federal or provincial public service

► Provide proof of full-time Canadian employment

From Y M	To Y M	Your address during your absence	Number of days
Total number of days			

D. RESIDENCY OBLIGATION (continued)

Option 3 - Absence while accompanying a family member who is a permanent resident of Canada and who is employed by a Canadian business or in the Canadian federal or provincial public service

Name of family member ► Provide proof of this person's permanent resident status and proof of this person's full-time employment.

Relationship to you ► Provide proof of your relationship.

From Y M	To Y M	Your address during your absence	Number of days
Total number of days			<input type="text"/>

E. DECLARATION OF APPLICANT

23. This declaration covers the information that I have provided on this form and all the information submitted in my application for a Permanent Resident Card as well as in the attached accompanying documents.

- I declare that the information I have given is truthful, complete and correct.
- **I understand that any false statements or concealment of a material fact may be grounds for my prosecution or removal.**
- The photographs enclosed are a true likeness of me.
- I am a permanent resident of Canada.
- I am not a Canadian citizen.
- I understand all the foregoing statements, having asked for and obtained an explanation on every point that was not clear to me.
- I realize that once this document has been completed and signed, it will form part of my Immigration Record and will be used to verify my family details on future applications.
- I will immediately inform Citizenship and Immigration Canada if any of the information or the answers provided in my application forms change.

Signature of declarant

Date Year Month Day

City

Province

Signature of parent or guardian, if applicable

Date Year Month Day

I am the applicant's: (check appropriate box) Mother Father Guardian

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

24. Complete this section only if you are applying to replace a lost, stolen, destroyed or never received PR Card.

Permanent Resident Card number Date of issue

Year	Month	Day

My Permanent Resident Card was Lost Stolen Destroyed Never received on or about

Year	Month	Day

 at

Under the following circumstances (full information must be provided below):

I have made the following efforts to locate this document
(if applicable, indicate police authorities notified and attach a copy of police report or incident report number):

Should I ever regain possession of my original PR Card, I promise to return it immediately to a Citizenship and Immigration Centre, or, if I am outside Canada, to the nearest Canadian Embassy, Consulate or High Commission.

I solemnly declare that the information 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 Citizenship and Immigration Canada to verify the information I have provided. I also understand that the provision of any false or misleading information may lead to prosecution in accordance with Section 127 of the *Immigration and Refugee Protection Act*.

Signature of declarant <input style="width: 90%;" type="text"/>	Signature of parent or guardian, if applicable <input style="width: 90%;" type="text"/>												
Date <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px;">Year</td><td style="width: 20px;">Month</td><td style="width: 20px;">Day</td></tr><tr><td style="text-align: center;"> </td><td style="text-align: center;"> </td><td style="text-align: center;"> </td></tr></table>	Year	Month	Day				Date <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px;">Year</td><td style="width: 20px;">Month</td><td style="width: 20px;">Day</td></tr><tr><td style="text-align: center;"> </td><td style="text-align: center;"> </td><td style="text-align: center;"> </td></tr></table>	Year	Month	Day			
Year	Month	Day											
Year	Month	Day											

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.**



USE OF A REPRESENTATIVE

A representative is someone who has your permission to conduct business on your behalf with Citizenship and Immigration Canada (CIC) and Canada Border Services Agency (CBSA). You may have **one** representative only. If you appoint an additional representative, the previous representative will no longer be authorized to conduct business on your behalf and receive information on your case file.

Your dependent children aged 18 years or older must complete their own copy of this form if they have a representative.

- I am: appointing a representative. **Complete Sections A, B and D.**
 cancelling the appointment of a representative. **Complete Section A, C and D.**

SECTION A: APPLICANT INFORMATION

1. Your full name

Family name (Surname)

Given name(s)

2. Your date of birth

Day	Month	Year

3. If you have already submitted your application:

Name of office where the application was submitted

Location of office

Type of application (permanent residence, extension of study permit, etc.)

4. Your Citizenship and Immigration Canada Identification number (if known)

Client Identification (ID) or Unique Client Identifier (UCI) number

SECTION B: APPOINTMENT OF REPRESENTATIVE

- I authorize the following individual to serve as my representative and to conduct business on my behalf with Citizenship and Immigration Canada and Canada Border Services Agency.
- I authorize Citizenship and Immigration Canada and Canada Border Services Agency to release information from my case file and that of my dependent children under 18 years of age to my representative. This authorization is in accordance with the *Privacy Act*.
- I am aware that any information which would be subject to exemption, if I had the right of access under the *Privacy Act* or the *Access to Information Act*, will likely not be released.

5. Your representative's full name

Family name (Surname)

Given name(s)

6. Your representative: (choose one)

is UNPAID and is a:

family member or friend

member of a non-governmental or religious organization

member of the Canadian Society of Immigration Consultants, a Canadian provincial or territorial law society, or the *Chambre des notaires du Québec*.

other

is or will be PAID and is a member in good standing of:

the Canadian Society of Immigration Consultants (CSIC)

 ▶ Membership ID number

a Canadian provincial or territorial law society

 ▶ Which province or territory?

 ▶ Membership ID number

the *Chambre des notaires du Québec*

 ▶ Membership ID number

7. Your representative's contact 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)			

By indicating your representative's e-mail address, you are hereby authorizing Citizenship and Immigration Canada to transmit your file and personal information to this specific e-mail address.

8. Your representative's declaration:

- I declare that the information in Section B is truthful, complete and correct.
- I understand and accept that I am the person appointed by the applicant to conduct business on the applicant or sponsor's behalf with Citizenship and Immigration Canada and Canada Border Services Agency.

Signature of representative

Date

Day	Month	Year

SECTION C: CANCEL THE APPOINTMENT OF A REPRESENTATIVE

I withdraw my authorization for this person to serve as my representative, to receive information on my case file and to conduct business on my behalf with Citizenship and Immigration Canada and Canada Border Services Agency.

9. Your representative's full name

Family name (Surname)

Given name(s)

Name of firm or organization
(if applicable)
SECTION D: YOUR DECLARATION**10.**

- I declare that the information I have given is truthful, complete and correct.
- I understand all the foregoing statements, having asked for and obtained an explanation for every point that was not clear to me.

Signature of applicant

Date

Day	Month	Year

Signature of spouse or common-law partner
(if applicable)

Date

Day	Month	Year

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

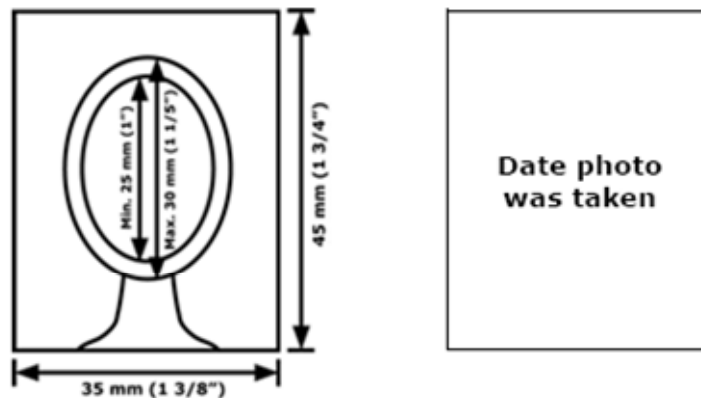
The information you provide on this form is collected under the authority of the *Immigration and Refugee Protection Act* and will be used in assessing your application according to the requirements of the Act. It will be retained in a Personal Information Bank identified in **Infosource**. It may be 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 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).