

DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection
FAST Commercial Driver Application - MX

Approved OMB No. 1651-0121
Exp. 8-31-2014

Please type or print

| | |
|--|---|
| 1a. (Check one box only) First time applicant Renewal Replacement | 1b. Border crossings most frequently used (Example, Laredo) |
| If renewal or replacement, current FAST Card No: _____ | |

SECTION A - PERSONAL INFORMATION

| | | | | |
|---|--|--------------------------------------|--|--|
| 2. Last/Paternal Name | | 2a. Maternal name | | |
| 3. First name | | 4. Middle name (in full) | | 4a. Suffix |
| 5. Other names used (e.g., maiden name, former name) | | Nickname | | 6. Gender Male Female |
| 7. Date of birth (yyyy/mm/dd) | | | | |
| 8. Place of birth City | | Country | | State |
| 9. Citizenship (Check all that apply.) Canadian citizen U.S. citizen Mexican citizen Other (Must Specify) _____ | | | | 10. Residence Canada United States Mexico |
| 11. Proof of citizenship/residency/immigration status (Attach copies) | | | | |
| U.S. Alien Registration No. _____ | | or Border Crossing Card No. _____ | | Birth Certificate No. _____ |
| Passport No. _____ | | Country of Issuance _____ | | (Expiration Date) (yyyy/mm/dd) |
| Other Type of document _____ | | No. _____ | | (Expiration Date) (yyyy/mm/dd) |
| Drivers license No. _____ | | (Attach Copy) _____ | | State and Country of Issuance _____ (Expiration Date) (yyyy/mm/dd) |

SECTION B - ADDRESS HISTORY FOR THE LAST 5 YEARS

| | | | | | | | | | |
|--|--|--------------------|-------------|---------------------|----------|--------------------|--------------------------|--|--|
| 12. Current address (yyyy/mm) | | 13. Street Address | | Apt. No. | 14. City | | 15. Colonia/Neighborhood | | |
| As of what date? | | | | | | | | | |
| 16. Country | | 17. State | | 18. Postal/Zip Code | | 19. Home telephone | | 20. Business telephone/Cell phone number Ext. | |
| Mailing address if different from residential address | | | | | | | | | |
| 21. Street Address | | | | | | Apt. No. | | 22. City | |
| 23. Colonia/Neighborhood | | | 24. Country | | | 25. State | | 26. Postal/Zip Code | |
| Previous residential addresses if current residence is less than five years (address history continued on page 4). | | | | | | | | | |
| 27. (yyyy/mm) | | 28. Street Address | | Apt. No. | | 29. City | | | |
| From: | | To: | | | | | | | |
| 30. Colonia/Neighborhood | | | 31. Country | | | 32. State | | 33. Postal/Zip Code | |
| 34. (yyyy/mm) | | 35. Street Address | | Apt. No. | | 36. City | | | |
| From: | | To: | | | | | | | |
| 37. Colonia/Neighborhood | | | 38. Country | | | 39. State | | 40. Postal/Zip Code | |
| 41. (yyyy/mm) | | 42. Street Address | | Apt. No. | | 43. City | | | |
| From: | | To: | | | | | | | |
| 44. Colonia/Neighborhood | | | 45. Country | | | 46. State | | 47. Postal/Zip Code | |

Paperwork Reduction Act Statement: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0121. The estimated average time to complete this application is 40 minutes. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection Office of Regulations and Rulings, 799 9th Street, NW., Washington DC 20229.

SECTION C - EMPLOYMENT HISTORY FOR THE LAST 5 YEARS

| | | | |
|--|---------------------|--------------------------|------------------------------|
| 48. Current employer (yyyy/mm) | | 49. Employer's name | |
| From: | To: | | |
| 50. Street Address, incl. Apt. No. | | 51. City | 52. Colonia/Neighborhood |
| 53. State | 54. Postal/Zip code | 55. Country | 56. Telephone number Ext. |
| 57. Occupation (attach separate sheet if necessary). | | | |
| Previous Employer name and address if current employer is less than five years (attach separate sheet if necessary). | | | |
| 58. (yyyy/mm) | | 59. Employer's name | |
| From: | To: | | |
| 60. Street Address, incl. Apt. No. | 61. City | 62. Colonia/Neighborhood | 63. State |
| | | 64. Postal/Zip code | 65. Country |

SECTION D - ADDITIONAL INFORMATION

66. Have you ever been convicted of an offense in any country? No Yes

What country were you convicted in? _____

If yes, have you ever received a waiver of inadmissibility to the U.S. from the CBP (former USINS)? No Yes

Have you ever been found in violation of customs or immigration laws? No Yes

If you have answered YES, please give details; _____

SECTION E - CERTIFICATION

67. I certify that all information given on this application, and in support of this application, was provided voluntarily and is true and complete. I understand that any information on this application, including any supporting documentation, background information, and biometric data may be shared among Customs and Immigration authorities in both Mexico and the U.S. and among law enforcement and other government agencies in accordance with applicable laws. I certify that I have read, understood, and agree to abide by all conditions required for use of the FAST program, including all instructions and notices accompanying this application.

| | | | |
|-----------|--------------|-----------|-------------------|
| Applicant | Name (print) | Signature | Date (yyyy/mm/dd) |
|-----------|--------------|-----------|-------------------|

U.S. PRIVACY ACT STATEMENT

The authority to collect the information on this application, any supporting documentation, fingerprints, and other requested information is contained in Titles 8 and 19 of the U.S. Code and corresponding regulations. Furnishing the information on this form is voluntary; however, failure to provide all the requested information may result in the delay of a final decision or denial of your application. The information collected will be used to make a determination on your application. It may also be provided to other government agencies (Federal, state, local, and/or foreign) as permitted under the Privacy Act of 1974, 5 U.S.C. § 552a (2002), and other applicable law. All applicants are subject to a check of criminal information databases and other immigration and customs databases in order to determine eligibility for this program.

Please mail or take your completed application along with fee to the nearest U.S./Mexico FAST Enrollment Center. Locations and addresses of U.S./Mexico FAST Enrollment Centers can be found at www.FASTDRIVER.gov

SECTION F - FEE PAYMENT (non-refundable)

69. The fee for an applicant to the FAST program is \$50.00 US only
All credit card fees will be processed as U.S. funds

I am enclosing a certified check or money order payment

Visa MasterCard
 Discover American Express

Once an application has been processed, absolutely no refunds will be granted. No exceptions.

| | | | |
|----------|-----------------|-----------|-----------------------------------|
| Card no. | Expiration Date | (yyyy/mm) | Card holder's name (please print) |
| | | | Card holder's signature |