

BUSINESS LICENCE APPLICATION

COMMERCIAL AND INDUSTRIAL

Business Information				
Legal Business Name				
Operating Business Name(s)				
Business Mailing Address				
	(Street Address)	(City)	(Province)	(Postal Code)
Business Site Address				
	(Street Address)	(City)	(Province)	(Postal Code)
Business Description				
Square Footage of Building		Square Footage used by Business		
Is your business eligible for a provincial exemption ? If so, please attach your provincial licence	License Attached?		Proof Attached?	
	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Is your business a registered non-profit organization ? If so, please attach proof on non-profit status	
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
Contact Information				
Work Phone			Cell Phone	
Primary Contact			Email	
Business Owner Information				
If the business is a corporation or has multiple owners, please attach a list to this application form that contains the full name, mailing address, telephone number, and email address of the principal managing employee(s) or board members			List Attached?	
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF THERE IS NO LIST ATTACHED, PLEASE COMPLETE THE FOLLOWING SECTION:				
Business Owners Name				
Owner's Mailing Address				
	(City)	(Province)	(Postal Code)	
Owner's Site Address				
	(City)	(Province)	(Postal Code)	
Work Phone			Cell Phone	

Supporting Documentation		
Development and Building Permits may be required for occupancy if there is a change to the Type of Business being conducted.	<input type="checkbox"/> Building/Development Permit - <i>if applicable</i>	
Are you renovating or altering the building to accommodate the business? <i>If yes, you must make a separate application for a Development Permit and/or Building Permit, as required and return the same with this Business Licence Application.</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO

Applicant's Declaration:		
In submitting this form, I am/We are declaring this information to be true and complete to the best of mine/our knowledge		
Applicant Name	Signature	Date

	I authorize the Town of Drumheller to advertise my business on Drumheller.ca and to disclose the applicable information to the Drumheller Chamber of Commerce for communication purposes
(Initial Here)	
	I have read and understand the Town of Drumheller Business Licence Bylaw and agree to comply with all the provisions within this Bylaw and all Federal, Provincial and Municipal Statutes
(Initial Here)	

Approval of this Business Licence does not exempt the applicant from obtaining necessary permits required through Municipal Bylaw or Provincial Laws and Regulations. This information is being collected under the authority of the Town of Drumheller for the purpose of providing licencing and advertising. It is protected by the privacy provisions of the Freedom of Information and Protection of Privacy Act. For more information contact the Town of Drumheller FOIP Coordinator at info@drumheller.ca or 403-823-1339.

Office Use Only			
Permit #		Receipt #	