

# BUSINESS LICENSE APPLICATION

## BUSINESS IDENTIFICATION (This information will published on our website unless specified below.)

Application Type:    New     Renewal     Start Date \_\_\_\_\_

Legal Company Name \_\_\_\_\_

Operating Company Name \_\_\_\_\_

Business Description \_\_\_\_\_

Bus. Address \_\_\_\_\_ Bus. City \_\_\_\_\_ Bus. Post. Code \_\_\_\_\_

Bus. Phone \_\_\_\_\_ Bus. E-mail \_\_\_\_\_

Bus. Fax \_\_\_\_\_ Bus. Website \_\_\_\_\_

Home Based?     Yes     No    If you answered Yes: Tax Roll # \_\_\_\_\_ Permit # \_\_\_\_\_

## HEAD OFFICE\OWNER INFORMATION

Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_

Postal Code \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

## LOCAL CONTACT INFORMATION

Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_

Postal Code \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

## OTHER LICENSING REQUIREMENTS

Food Establishment     Liquor Sales     Vehicle Sales     Vehicle Repair     Autobody Repair

Gasfitter     Plumber     Electrician     Other \_\_\_\_\_

## CITY INFORMATION SERVICES

The City of Wetaskiwin places business information on our website ([www.wetaskiwin.ca](http://www.wetaskiwin.ca)) so citizens can find businesses and service providers. If you do not want your information posted on these sites please check the following boxes.

Do not post on City website     Do not post on Chamber of Commerce website     Do not send City faxes

The personal information in this form is being collected under Section 33( c ) of the Freedom of Information and Privacy Act (FOIP) and may be used to notify the Applicant in regard to: eligibility to obtain/renew a Business License, revocation of a Business License, a violation under the Business License Bylaw or in case of an emergency. You should be aware that Business Identification information will be made available on the City of Wetaskiwin and may be disclosed to members of the public in accordance with FOIP. You should also be aware that the same business information collected will also be provided to the Wetaskiwin Chamber of Commerce. If you have any questions or concerns regarding the use of information collected, please contact the City of Wetaskiwin at 780-361-4400.

I hereby make application for a City of Wetaskiwin Business License and verify that the information provided is correct.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

## FOR INTERNAL USE ONLY

NA# \_\_\_\_\_ NAICS# \_\_\_\_\_ A/R # \_\_\_\_\_ BL # \_\_\_\_\_