RESORT VILLAGE OF TOBIN LAKE



PO Box 1479 Nipawin, SK S0E 1E0

306-862-2895 $\frac{rvtobinlake@sasktel.net}{www.resortvillageoftobinlake.ca}$

ANNUAL BUSINESS LICENCE APPLICATION

	Mailing Address		Phone Number ()	
APPLICANT	Mulling Address		Email	
	Owner Authorization (if applicant is not the owner)			
	I,to submit application (name of owner) (name of applicant) for a business license at the property address listed below.			
	Signature			
BUSINESS INFORMATION	Business Name	Contact	Name	
	Business Mailing Address	Phone N	Number ()	
		Email		
	License Category (choose one) Seasonal – business does not exceed 5 consecutive months in a calendar year			
	General Seasonal Annual			
	Transient Trader/Contractor Seasonal Annual			
	Home-based Seasonal Annual Mobile Food Vendor Seasonal Annual			
	Farmer's Market Seasonal Annual			
	Unclassified Seasonal Annual			
	Development Permit Application attached for <i>home-based businesses</i>			
<u> </u>	Discharge Management Plan – of FOG + Grey Water			
ECKLIS	Proof of Liability Insurance			
동	Sask Health Authority Approval			
7	DECLARATION:			
0	I, of agree to comply with the Business Licence Bylaw of _		in the province of Saskatchewan,	
DECLARATION	agree to comply with the Business Licence Bylaw of and acknowledge that it is my responsibility to ensure compliance with the Business Licence Bylaw.			
Δ	Signature	Date		

	SHA Approval
Date Received:	DMP
Receipt #:	Completed Development Permit Application