RESORT VILLAGE OF TOBIN LAKE



PO Box 1479 Nipawin, SK S0E 1E0 306-862-2895 <u>rvtobinlake@sasktel.net</u> www.resortvillageoftobinlake.ca

ANNUAL BUSINESS LICENCE APPLICATION

APPLICANT	Name		
	Mailing Address	Phone Number ()	
		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 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>		
CHECKLIST	Discharge Management Plan – of FOG + Grey Water		
	Proof of Liability Insurance		
	Sask Health Authority Approval		
DECLARATION	DECLARATION:		
	l, of	in the province of Sas	skatchewan,
	I, in the province of Saskatchewan, agree to comply with the Business Licence Bylaw of and acknowledge that it is my responsibility to ensure compliance with the Business Licence Bylaw.		
	Signature Date		

OFFICE USE ONLY

Date Received: _____ Receipt #: _____