

FORM A

APPLICATION FOR A BUSINESS LICENSE

As per Bylaw No. 1-2018

Name of Business: _____

Name of Applicant: _____

Address (Mailing): _____

Phone Number: _____ Cell Phone: _____

Fax Number: _____ E-mail: _____

Nature of Business: _____

Place where the license is to be exercised or where the proposed calling is to be carried on:

Contact Person (if different from the applicant): _____

Address (Mailing): _____

Phone Number: _____ Cell Phone: _____

Fax Number: _____ E-mail: _____

Applicant's Signature: _____ Date: _____

If your business license has been approved, a receipt will be issued and considered to be the Business License.

License No.: _____ Category: _____ Home Based Business (\$25.00)
_____ Transient Trader &/or Direct Seller (\$50.00)
_____ Contractor (\$100.00)

Municipal Official's Signature: _____

Date: _____