

THE CORPORATION OF THE CITY OF TIMMINS

BUSINESS LICENCE APPLICATION BYLAW 2016-7798

NEW BUSINESS : RENEWAL : CHANGE OF OWNERSHIP:

LICENCE CATEGORIES

LICENCE FEE:

CASH:

CHEQUE:

APPLICANT IDENTIFICATION

NAME:

DRIVER'S LICENCE NO:

ADDRESS:

CITY:

POSTAL CODE:

DATE OF BIRTH: YR.

MO.

DAY.

TELEPHONE NO.:

BUSINESS TELEPHONE NO.:

FAX NO.

PARTNER IDENTIFICATION

NAME:

DRIVER'S LICENCE NO: _

ADDRESS:

CITY:

POSTAL CODE:

DATE OF BIRTH: YR.

MO.

DAY.

TELEPHONE NUMBER:

BUSINESS IDENTIFICATION

OPERATING BUSINESS NAME:

OPERATING BUSINESS ADDRESS:

MAILING ADDRESS(if different):

LEGAL DESCRIPTION:

ROLL NO:

5627-

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APPROVAL REQUIRED FROM THE FOLLOWING INDICATED BY "X" IN BOX:

NAME

POSITION

SIGNATURE/DATE

ZONING

CINDY WELSH/DAVE ST.ONGE

BUILDING

ESA SAARELA

FIRE

ROCK RICE

HEALTH
UNIT

AN INSPECTOR

ENG.

(for refreshment vehicles only)

OTHER

REQUIRED DOCUMENTATION INDICATED BY "X":

____ Proof of \$2,000,000.00 Liability Insurance Coverage

____ Proof of WSIB Coverage

____ Trade Certificate ____ Business Name Registration

COMMENTS (for City use only)

CORRECT FULL NAMES, ADDRESSES AND TELEPHONE NUMBERS OF THE FIRMS REPRESENTED BY THE APPLICANT:

HAS THE APPLICANT EVER OPERATED A BUSINESS IN THIS MUNICIPALITY? IF SO, STATE THE NAME, NATURE, LOCATION, AND DETAILS OF SAME:

LIST OTHER MUNICIPALITIES IN ONTARIO IN WHICH THE APPLICANT HAS OPERATED A BUSINESS DURING THE YEAR PRECEDING THE DATE OF THIS APPLICATION:

LIST ANY CONVICTIONS FOR A CONTRAVENTION OF ANY MUNICIPAL; BY-LAW, OF THIS CITY OR ANY ONTARIO MUNICIPALITY REGULATING PEDDLERS, THE BUSINESS PRACTICES ACT OR THE COMBINES INVESTIGATION ACT:

DESCRIBE GOODS, WARES OR MERCHANDISE OR SERVICES TO BE SOLD:

LOCATION WHERE GOODS, WARES OR MERCHANDISE PURCHASED:

COMMENTS, FOR CITY USE ONLY:

I, THE UNDERSIGNED APPLICANT, HEREBY CERTIFY THAT:

1. to the best of my knowledge and belief, the information hereinbefore set forth and attached hereto is true and correct.
2. I am familiar with the terms and provisions of the By-Laws of the Corporation of the City of Timmins relating to the carrying on of the type of business in respect of which this application is being made.
3. I will comply with terms and provisions of such By-Laws.
4. I will comply with the provisions of the Ontario Fire Code.
5. I understand that I am not allowed to carry on the trade or business in the City of Timmins in respect of which this application for Licence is being made unless and until this application has been approved by the Council of the Corporation of the City of Timmins and/or the Licencing Officer and the necessary licence issued.
6. I will furnish to the Licence Issuer for the City of Timmins or the Council, upon demand, such further and other information as may be required.
7. I further understand that if any of the above information is found to be incorrect or falsified after issuance of a licence, my licence shall be revoked immediately.

DATED AT THE CITY OF TIMMINS, ONTARIO THIS ____ DAY OF _____ 20__.

Full Signature of Applicant: _____

City Approval: _____