BUSINESS LICENSE APPLICATION

BUSINESS DETAILS:

Name of Business:

Name of Applicant:

Description of Business or Service:

Mailing Address:

Civic Address:

Business Phone #: Cell Phone #:

Email:

Is this Business Operated from a Residence in the Village of Clyde?

☐ NO - Proceed to next section.

☐ YES - Fill out this section:

Has a Development Permit been issued for this home occupation?

☐ NO - Please apply for a Development Permit. Your business License will be issued once the permit is valid.

☐ YES - Permit #:

Has the Development Permit been renewed this calendar year?

☐ NO - Please renew prior to issuance of Business License.

☐ YES - Proceed to Next Section.

If Operating as a Hawker/Peddler, what is the duration of the license you are seeking?

☐ 1 Day ☐ 1 Week ☐ 1 Year

Are you a resident of the Village of Clyde? ☐ Yes ☐ No Provincial License #:

Signature:

Date:

Personal information is collected under the authority of S.4(C) of the Protection of Privacy Act and will be used in the management and administration of the Village of Clyde's Business License processes. Information related to your application/permit/request, may be disclosed as required by law. If you have any questions about the collection, use or disclosure of your personal information contact the Access to Information and Protection of Privacy Coordinator at 780-348-5356.