



Application for a Business Licence

TYPE OF BUSINESS: _____

NAME OF BUSINESS: _____

LOCATION OF BUSINESS: _____
(Address)

Peterborough, Ontario _____
(Postal Code) (Business Telephone Number)

APPLICANT(S): _____
(Name)

(Address)

(City) (Province) (Postal Code)

(Home or Mobile Phone Number)

Business Number (as issued by the Canada Revenue Agency), if applicable OR

Business Registration Number (as issued by the Ministry of Government Services), if applicable

A copy of the Master Business Licence issued by the Province of Ontario must be attached, if applicable.

I hereby apply for a business licence in respect of the above-described business, and acknowledge that I must comply with all applicable municipal by-laws and regulations in the operation of such business.

Signature of Applicant: _____ Date: _____

For Office Use Only:

INSPECTIONS TO BE COMPLETED <i>BEFORE</i> LICENCE IS ISSUED			
	Recommended	Not recommended	DATE
PLUMBING/MECHANICAL	_____ (Signature)	_____ (Signature)	_____
ZONING	_____ (Signature)	_____ (Signature)	_____
HEALTH	_____ (Signature)	_____ (Signature)	_____
FIRE	_____ (Signature)	_____ (Signature)	_____

APPLICATION NUMBER: _____

Personal information on this form is collected under the authority of the *Municipal Act*, Section 11, and the City of Peterborough Business Licensing By-law, and will be used to licence, regulate and govern businesses and ensure compliance with all laws and regulations. Questions about the collection of this information should be made to the City Clerk, City of Peterborough, 500 George Street North, Peterborough, Ontario K9H 3R9, Telephone: 705-742-7777 ext 1820.