



## Application for a Business Licence Drain Layer, Plumber, Sheet Metal Worker

**TYPE OF BUSINESS:** \_\_\_\_\_

**NAME OF BUSINESS:** \_\_\_\_\_

**LOCATION OF BUSINESS:** \_\_\_\_\_  
(Address)

\_\_\_\_\_ (Postal Code) (Business Telephone Number)

**APPLICANT:** \_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_ (City) (Province) (Postal Code)

\_\_\_\_\_  
(Home or Mobile Phone Number)

A copy of the Certificate of Qualification issued by the Province of Ontario must be attached.

A copy of the applicants Drivers Licence must be attached.

**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:**

<b>INSPECTION TO BE COMPLETED <i>BEFORE</i> LICENCE IS ISSUED</b>		
	<b>Recommended</b>	<b>Not recommended</b>
<b>PLUMBING/MECHANICAL</b>	_____ (Signature)	_____ (Signature)
		_____ DATE

**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.