

New Licence **Name Change** **Change of Occupancy** **Change of Address** **Change of Ownership** **Reprint**

I, _____ herewith make application for a licence under the provisions of the Licencing
(Name of Applicant)

Bylaw No. 05-2019 of the Town of Vegreville to establish and operate a business within the Town of Vegreville. The said Business will be operated under the:

Company/Personal name of: _____

Civic Address of Business: _____

Description of Business: _____

Name of Owner/Manager: _____

Business Mailing Address: _____

Business Phone: _____ **Resident Phone:** _____ **Cell Phone:** _____

Email: _____ **Website:** _____

DO NOT post my Business information on the Business Directory OR Google Maps though the Town's Website

My business has less than 50 employees

As required by Provincial or Municipal Legislation, I have obtained and possess the following:

A. Provincial Licence Requirements: Alberta Licence No.: _____ Expiry Date: _____

B. Approved under Health Regulations _____

(Health Inspector or other Authority)

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT

Date: _____ **Applicant's Signature:** _____

The personal information collected on this form is collected for the administrative purposes establishing business licenses. The personal information is collected under the authority of Bylaw 05-2019 and the Protection of Privacy Act, Section 4(c) and may be used for statistical reporting. For questions about the collection of personal information, contact the Town of Vegreville Privacy Officer at privacyofficer@vegreville.com, 780-632-7951 or 4829-50 Street, Box 640, Vegreville, Alberta T9C 1R7.

FOR OFFICE USE ONLY

Fire Discipline Inspection: _____
(Safety Codes Officer)

Approved under the Land Use Bylaw: _____
(Development Authority)

Business Licence Fee: _____

Issued By: _____

Fire Inspection Fee: _____

Business Type: _____

Business Licence No.: _____

Cash Receipt No.: _____

Development Permit No.: _____

Approved By: _____

Other Comments: _____