

BUSINESS LICENCE APPLICATION

PAWNBROKER / SALVAGE YARD / TOURIST OR TRAILER CAMP

Purpose: New Business Change of Name/Personal info
 Change of Location Change of Ownership

Licence being applied for: Pawnbroker Tourist / Trailer Camp
 Salvage Yard

Operating / Opening Start Date: _____

PLEASE PRINT CLEARLY

PART 1 Business - This information will appear on your Business Licence

Operating "AS" Name: _____

Operating Address: _____
and Street Apt/Unit # City/Province Postal Code

Business Phone #: _____ Business Fax #: _____

Mail

PART 2 Applicant - This information will appear on your Business Licence

Business Name/Numbered Company: _____

Owner's Name: _____
First Name Last Name

Business Address: _____
and Street Apt/Unit # City/Province Postal Code

Business Phone #: _____ Business Fax #: _____

Business Email Address: _____

(Note: Email will not appear on your licence)

Mail

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PART 3

Owner - This information will NOT appear on your Business Licence

Owner's Name: _____
First Name Last Name

Owner's Home Address: _____
and Street Apt/Unit # City/Province Postal Code

Home Phone #: _____

Mail

WARNING: You require a Municipal Business Licence to operate a business. Persons who operate a business without the required licence are liable to prosecution. Penalty of conviction may be to a maximum of \$25,000 exclusive of costs; and for a Corporation, to a maximum of \$50,000 exclusive of costs.

Personal information required by this form is collected under the authority of the Municipal Act and the City of Burlington Business Licensing **By-law 42-2008** and will be used for licensing purposes and for law enforcement purposes to ensure compliance with the bylaw. Questions regarding the collection of this information may be addressed to: Licence Clerk, Planning and Building Department, 426 Brant Street, P.O. Box 5013, Burlington, Ontario, L7R 3Z6. Telephone 905-335-7731.

Providing false or incomplete information could result in the refusal of this application or, if your licence has been issued, in a recommendation to the Licensing Committee that your licence be suspended or revoked.

I, (please print name) _____, business owner acknowledge it is my responsibility to notify the City of Burlington in writing immediately of any change in the information provided during the course of the application, the period of a licence and upon any renewal of a licence and to ensure compliance with the City of Burlington Business Licensing **By-law 42-2008**, as amended, should a licence be issued.

Business Owner's Signature: _____ Date: _____

OFFICE USE ONLY

Fee: _____

Received Date: _____ Payment Information: _____

Accepted By: _____ Licence #: _____

Zoning Approval

Zoning Designation: _____

Signature & Date: _____