

FOR OFFICE USE ONLY
Business License #:

Application received by:

PLEASE READ 'THE INFORMATION AND GUIDE FOR BUSINESS LICENSE APPLICANTS' PRIOR TO COMPLETING THIS FORM.

For a rental property/accommodation business, complete the ACCOMMODATION Business License Application Form.

All business licenses expire on December 31st of the current year. Renewal notices are mailed in January for the current year to the current address we have on file for your business. Please be sure to update the City should this address change.

Applicant Type

New Licence New Ownership Business Name Change Location Change

Business Type

<input type="checkbox"/> Commercial Retail	<input type="checkbox"/> Escort Service	<input type="checkbox"/> Gaming Facility	<input type="checkbox"/> Home Based Business
<input type="checkbox"/> Pawnbroker	<input type="checkbox"/> Cannabis Retail	<input type="checkbox"/> Cannabis Production	<input type="checkbox"/> Financial Institution <i>(Includes cash lending)</i>
<input type="checkbox"/> Establishment selling Liquor <i>(for consumption on site)</i>	<input type="checkbox"/> Mobile Vendor <i>(Selling goods & food)</i>	<input type="checkbox"/> Other	

Business Information

Business Operating Name: _____

First date of business in the City of Quesnel (or effective date of change): _____

Business Location

Address: _____

City: _____ Province: _____ Postal Code: _____ Country: _____

Mailing Address (if different)

Address: _____

City: _____ Province: _____ Postal Code: _____ Country: _____

Owner Information

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____ Country: _____

Phone: _____ Alt Phone: _____ Email: _____

If applicant is a minor, written acknowledgment and consent by a parent or guardian must be provided

Former Business Information (if applicable)

Former Business Operating Name: _____

Former Business Location Address: _____

City: _____ Province: _____ Postal Code: _____ Country: _____



Business Location Information

Description of business (including primary and secondary uses):

Was the premises previously occupied? No Yes, type of use: _____

If applicable, please describe in detail the construction and/or renovations intended for the space (Walls, plumbing, electrical, painting, flooring, etc. Note: permits may be required):

Will you be erecting, constructing, painting, altering, or relocating any sign(s)? No Yes

If yes, you must obtain a sign permit. The charge for a sign permit is waived if the permit application is received within two weeks of Business License approval.

Gross floor area of business (m2 or sq. ft.): _____ Gross floor area of home (m2 or sq. ft.): _____

No. of employees: _____ No. of washrooms: _____

No. of business related vehicles: _____ Hours of operation: _____

No. of parking spaces allocated solely for your business: _____ No. of seats (dining/restaurants/bars): _____

Do you have a liquor primary licence? No Yes (attach a copy of the licence)

Home Based Business: Do you rent or own the property (Letter of Permission from Property Owner required)? Rent Own

Application Checklist

<input type="checkbox"/> Copy of valid photo identification of ALL owners/operators (i.e. Driver's License)	<input type="checkbox"/> Rental Permission Letter from Property Owner
<input type="checkbox"/> Proof of Incorporation (Incorporated, Society or Partnership)	<input type="checkbox"/> Parent/Guardian Permission Letter for Minor
	<input type="checkbox"/> Sign Permit Application

Agreement

I/We, the undersigned, confirm as the applicant and/or business owner(s) that the above noted information is correct and agree to comply with all relevant provisions of the Business Regulation and Licensing Bylaw, any other applicable City bylaws and other laws in force, now and in the future. Further, failure to meet these obligations may result in the business license being suspended or reported to City Council for possible revocation.

I/We, the undersigned, understand that renewal fees are due January 1st of each calendar year and that I/We will notify the City of Quesnel if I no longer require a business license.

I/We, the undersigned, understand that the personal information collected on this form is collected for the purpose of processing this application and for the administration and the enforcement of this business license. The personal information collected is under the authority of the Community Charter, Local Government Act and the City's bylaws. In accordance with the Freedom of Information and Protection of Privacy Act, this application and associated documentation may become part of a public record.

Personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act (FOIPPA) and will be used only for the purposes of responding to your request.

Print Name

Signature(s)

Date