



# Business License Application Form

Request for:

New License

Renewal License

**Adult Entertainment Parlours**

- Owner
- Owner/Operator
- Entertainer

**Adult Videos**

- Store
- Video Tape Store

(where provision of Adult Videotapes is only incidental to the carrying on of the business of the provision of videotapes)

**Amusement - Place of**

- Class A (more than 4)
- Class B (1 to 4)
- Class C (Mall up to 10)
- Family Entertainment Centre

**Auctioneers**

**Billiards**  
(No. of tables \_\_\_\_\_)

**Body Rub Parlour**

- Body-Rub Parlour Owner
- Body-Rub Parlour Owner/Operator
- Body-Rub Parlour Operator
- Body-Rub Attendant's

**Bowling Alley**

**Carnival Location** \_\_\_\_\_

**Catering/Refreshment Vehicles/Carts**

- Bicycle
- Carts
- Vehicle
- Operator

**Hawkers & Peddler (Duration of Sale)**

Location: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

- Class A
- Employer License
- Class B "Special Sale"
- Class C "Shopping Mall"
- Class D "Shopping Mall"
- Class E "Show Sale"

**Horse-Riding Establishment**

**Newspaper Boxes**  
(no. of boxes: \_\_\_\_\_)

**Outdoor Serving Area**

**Second Hand Goods Shops & Dealers**

## Business Information

*Please Print Clearly*

Name: \_\_\_\_\_  
 Corp: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Prov/Post: \_\_\_\_\_  
 Phone: ( ) - \_\_\_\_\_ Fax: ( ) - \_\_\_\_\_  
 E-Mail: \_\_\_\_\_

Mailing Address: (if different from business address)

Address \_\_\_\_\_  
 \_\_\_\_\_  
 City/State \_\_\_\_\_  
 Postal Cod \_\_\_\_\_

## License Information

Type: \_\_\_\_\_

## Business Contacts

Name: \_\_\_\_\_ Business #: ( ) - \_\_\_\_\_  
 Address: \_\_\_\_\_ Home #: ( ) - \_\_\_\_\_  
 City: \_\_\_\_\_ Prov/Post: \_\_\_\_\_ Fax: ( ) - \_\_\_\_\_  
 E-Mail: \_\_\_\_\_

## Signature and Date

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Received by: \_\_\_\_\_ Date: \_\_\_\_\_