

General Business Licence Application

Date Received:		Licence Number:	
A. Type of Licence:			
B. Description of Business:			
C. Application Requirements:			
The following documents may be required as part of your application:			
☐ Proof of Canadian Citizenship, or a landed immigrant or produce a valid work permit			
☐ Proof of photo identification			
☐ Provide a copy of the incorporating documents			
☐ Provide a copy of the registered declaration of partnership if applicable			
☐ Current valid Class "G" Ontario Driver's Licence			
☐ Harmonized Sales Tax (HST) number			
☐ Criminal Record Check issued within 30 days of the application			
☐ Driver's Abstract issued within 30 days of application			
☐ Proof that applicant is at least eighteen (18) years of age			
☐ Vehicle Ownership			
☐ York Regional Health Department Inspection Certificate			
☐ Insurance certificate			
☐ All new applications shall be accompanied by a non-refundable \$50.00 application processing fee			
☐ Fee			
C. Business Information			
Name of Business:			
Street address:			
Municipality:	Postal code:	Province:	E-mail:
Telephone number:	Fax		Applicant Contact number:
D. Declaration of Applicant			
Icertify that:			
(print name) By signing this application the Owner/Applicant agrees that all information provided is true. The Owner/Applicant further agree that any false information may result in a revocation of any licence that may be issued.			
Date Signature of Applicant			
This application may contain personal information as defined under the <i>Municipal Freedom of Information and Protection of Privacy Act</i> . The information collected is required pursuant to the terms of the <i>Municipal Act</i> and will be used by the Town of Newmarket to process the application, and to determine whether to issue a licence. Information will also be used for administration of such licence, and for law enforcement purposes to ensure compliance with all applicable statutes, regulations and by-laws. Office Use Only			
Date:		Approved by:	
Owner's licence: \$		Account Number:	