

**SCHEDULE "A"**  
Village of Sayward  
Business Licence Application

Name of Business: \_\_\_\_\_

Business Street Address: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_ Business Fax Number: \_\_\_\_\_

Type of Business \_\_\_\_\_

Home Based Business:    Y    N                                      Number of Employees: \_\_\_\_\_

Name of Business Owner: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Name of Operator (if different from Owner): \_\_\_\_\_

Address of Operator: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Operator's Home Number : \_\_\_\_\_ Is the property    \_\_\_\_ leased    Owned \_\_\_\_

Name of Property Owner (if leased): \_\_\_\_\_

Address of Property Owner: \_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_

Number of Units (campsites, rooms): \_\_\_\_\_ Number of Seats (restaurant/pub): \_\_\_\_\_

Other Permits or Licences Required:    Ministry of Environment Permit: \_\_\_\_ Liquor Licence: \_\_\_\_

Health Permit: \_\_\_\_    Fire Inspector: \_\_\_\_    Other: \_\_\_\_

I understand that a Business Licence is an annual requirement and must be renewed each year; that my Business Licence may require permits and licences from other government agencies; that satisfactory proof of their approval must be provided prior to the issuance of a Business Licence; that my Business abide by the bylaws of the Village which include water, sewer and waste disposal, which may establish annual or other rates to be paid for certain services; that these rates also apply to home based businesses; that any fees for services payable are effective the date of issuance of this permit; and that this Business Licence is issued on the condition that any changes to the information provided will be provided immediately to the Licence Inspector. I hereby submit my application for Business Licence and fully understand the conditions contained herein.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Application

Village of Sayward Business Licence Bylaw No. 452, 2019

For Office Use Only

Property Zoned: \_\_\_\_\_ Is Proposed Use Permitted: \_\_ Yes \_\_ No

Other Agency Approval required: \_\_ Yes \_\_ No (specify) \_\_\_\_\_

Other Agency Permits or Licence required: \_\_ Yes \_\_ No (specify) \_\_\_\_\_

Building Inspector Approval Required: \_\_ Yes No \_\_ (specify) \_\_\_\_\_

Council Approval Required: \_\_ Yes No \_\_ \_\_\_\_\_

Copy of approval provided: \_\_ Yes No \_\_ \_\_\_\_\_  
(when change in use occurs)

Fee: \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

\_\_\_\_\_  
Licence Inspector

\_\_\_\_\_  
Date

Special comments: