

City of Revelstoke
BUSINESS LICENSE APPLICATION

LICENSE NO. _____
FOLIO NO. _____

To Be Filled in by Applicant

Business Name _____

Civic Address _____ Business Phone No. _____

Mailing Address _____

Registered Property Owner _____

Type of Business _____

State number of seats, sq. footage, rooms, pieces of machinery, apartment unit, etc.

Applicant's Name _____

Civic Address _____ Phone No. _____

The Licensed Period is January 1 to December 31.

I, hereby make application for a license in accordance with the particulars as above stated and declare that the above statements are true and correct. I undertake that if I am granted the license applied for, I will comply with all obligations contained in the Bylaws and amendments thereto in force or which may hereafter come into force in the City of Revelstoke.

Signature of Owner or Authorized Agent

Date

NOTICE OF COLLECTION OF PERSONAL INFORMATION

Personal Information on this form is required for the purpose of processing this application and for administration and enforcement. The personal information is collected under the authority of the Local Government Act, Section 658, and the City of Revelstoke Bylaw 1503.

OFFICE USE ONLY

Classification Code _____

License Inspector _____

Fee \$ _____ P: _____ T: _____

Building Inspector _____

Bond _____

Medical Health Officer _____

Comments _____

Fire Chief _____

Electrical Inspector _____

Final Approval Date _____

Commercial Utilities _____

Master Record Setup _____