



BUSINESS LICENSE APPLICATION

Information collected on this form is collected pursuant to Section 210 (1), (5) and (11) of the Municipal Act, R.S.O. 1990, c,m,45, as amended, and is necessary to process a business license application

New Application \$53.00 **Change of Ownership \$27.00** **Change of Address \$27.00** **Change of Business Name \$27.00**

Individual/Sole Proprietorship
Partnership
Corporation

Note: This application will be subject to Zoning Approval

1. Business Information

Operating as Business Name	
Business Owner's Name	
Business location (Street address, unit number and postal code)	
Business Phone	Email Address
Anticipated opening date	

2. Applicant Information

Applicant's Name	
Residential Address (Street address, unit number, city and postal code)	
Home Phone	Cellular
Company Title/Position	
Email Address	

3. General Application Requirements (please attach the following)

<input type="checkbox"/> Sole Proprietor: Copy of government issued identification
<input type="checkbox"/> Corporation: Copy of Certificate of Status (or equivalent)
<input type="checkbox"/> Business Owner Authorization Letter (if applicant is not the business owner) Copy of authorization letter from the property owner attached
<input type="checkbox"/> Floor plans or site plans, as required
<input type="checkbox"/> Copy of Certificate of Insurance
<input type="checkbox"/> Introduction Letter: explain the business which includes a list of all the uses undertaken
<input type="checkbox"/> Building Owner Authorization Letter / Lease Agreement

Other information if necessary

4. New or Renewal Licence (Please answer all of the following questions)

1. Will the business be operating in an existing building?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Are you contemplating any building/alteration work associated with this Business Licence? Note: a building permit may be required and/or development charges may be applicable before issuance of business licence	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Have you applied for a Building Permit/Plumbing Permit ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Are there any active permits or orders for this property?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Are you planning to erect a sign? If yes, please fill out and submit the Sign Permit Application that is attached to this form	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. Please indicate the amount of floor space that will be used for the business and the location of The business (ex. Detached garage, attached garage, house)	_____	
7. How many employees will be working on site?	_____	
8. Will there be any day-to-day activities at the location? (ex. Retail store, personal service establishment)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

5. Declaration

IN THE MATTER of By-law 2019-20 and amendments thereto, for regulating the issuance, renewal and approval of licences in the Corporation of the City of Clarence-Rockland,

I, *(please print)* _____

the undersigned, certify that the statements herein contained in the said application are true and made with a full knowledge of the circumstances connected with the same, and acknowledge that I have read the declaration and notice contained below.

The undersigned agrees that the issuance of a licence will be subject to approvals from such municipal or provincial departments or agencies, as the Licence Manager deems necessary. The issuance of a licence is not indented and shall not be construed as permission or consent by the Corporation for the holder of the licence to contravene or fail to observe or comply with any law of Canada or Ontario or any by-law of the Corporation.

Any business licence application that has not received approvals from all municipal or provincial departments or agencies due to the applicant's inability to comply with the licence requirements within 90 days from the date of filing the application shall be deemed refused.

Signature of Applicant/Corporate Officer

Date (dd/mm/yy)

FOR CITY HALL USE ONLY

Fee Collected: _____

Received by: _____

Zoning Comments:

Signature: _____

Date (dd/mm/yy)

Building Comments:

Signature: _____

Date (dd/mm/yy)

By-Law Comments:

Signature: _____

Date (dd/mm/yy)

Health Unit Comments:

Signature: _____

Date (dd/mm/yy)

Fire Comments:

Signature: _____

Date (dd/mm/yy)

License Fee: _____

Business Category: _____

Reference #

Approval: _____
signature & date

Sticker given date: _____