

**APPLICATION TO CARRY ON BUSINESS  
WITHIN THE BOUNDARY OF THE  
DISTRICT OF PORT EDWARD**

*I/We hereby make application under the provisions of the District of Port Edward Bylaw No. 389 for a licence to carry on the (circle one) Business, Trade, or Profession of: \_\_\_\_\_ within the boundaries of the District of Port Edward.*

**Business Information:**

Applicant's Name		Relationship (owner, operator, manager)	
Business Name			
Business Mailing Address			
Telephone No.	Fax No.	Business Registration No.	
Location of business activity		Business Classification	
Other contact information			
<b>Please complete the following only where applicable:</b>			
Nature of business			
Goods being sold/service provided			
Number of barber chairs	Number of vending machines	Hairdressers: Number of operators	
Seating capacity	Number of billiards/pool tables	Number of people regularly employed	
Number of game machines	Floor area/ground area of premises	Number of service bays	
Number of bowling lanes	Number of rental units maintained	Liquor Licence <input type="checkbox"/> Yes	
Number of vehicles		<input type="checkbox"/> No	

**Applicant's Information:**

Address and phone number (if different than above)

**For office use only:**

Licence valid from May 1, _____ to April 30, _____.	Zoning Classification	
<input type="checkbox"/> Health inspection required <input type="checkbox"/> Building inspection required <input type="checkbox"/> Other _____		
OTHER DETAILS REQUIRED BEFORE APPLICATION APPROVAL		
OTHER PERMITS/CERTIFICATES REQUIRED BEFORE APPLICATION APPROVAL		
Fee	Receipt	Licence Number

This application has been approved, and upon payment of the fee, the business licence may be issued.

\_\_\_\_\_  
Signature of Licence Inspector

\_\_\_\_\_  
Date

Bylaw No. 389 Section III

1. No person shall:
  - (a) carry on any business within the district unless he is the holder of a valid and subsisting licence; or
  - (b) once licensed to carry on a business from a specific location in the District, carry on a similar or different business from other locations in the District, unless he is the holder of a valid and subsisting licence for those additional locations; or
  - (c) carry on more than one business in or from any one premise unless he is the holder of valid and subsisting licence for each of those businesses, unless otherwise specified in this bylaw; or
  - (d) when making application for a licence under the provisions of this bylaw, provide false information respecting the nature and address of the business, the number of persons engaged or occupied in the business, or any other information which the Licence Inspector may require to classify the business or to calculate the licence fee.
2. Subsection 1(c) shall not apply to any business that is exempted from the requirements of this bylaw by a Federal or Provincial Act or Regulation.

Bylaw No. 389 Section IV

3. A licensee shall apply for renewal of this licence, prior to the beginning of each licensing period prescribed in Section 8, if he continues the business.

Bylaw No. 389 Section VII

3. Licenses shall be granted so as to terminate on the Thirtieth (30th) day of April and no proportionate reduction shall be made on account of any person commencing or ceasing to do business at any particular time.

*I/we agree to conform to all the requirements of the said Bylaw and all other Statutes and Bylaws in Force in the District of Port Edward.*

*In consideration of the granting of this Permit, I/we agree to release and indemnify the District of Port Edward, its Council members, employees and agents from and against all liability, demands, claims, causes, of action, suits, judgements, losses, damages, costs, expenses of whatever kind which I/we or any other person, partnership or corporation or my/our respective heirs, successors, administrators or assignees may have or incur in consequence of or incidental to the issuing of this Licence or any inspection, failure to inspect, certification, approval, enforcement or failure to enforce the District of Port Edward Bylaw No. 389, and I/we agree that the District of Port Edward owes me/us no duty of care in respect of these matters.*

I/we have read the above agreement, release and indemnity and understand it.

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Signature of Applicant or Agent

Date

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Address

Phone No.