

District of Lillooet
BUSINESS LICENSE NO. _____
(If approved)

BUSINESS LICENSE APPLICATION

Businesses operating in Lillooet are required to have a valid business license. The information requested in this application is necessary to fully evaluate your request for a business license. Completion of this form does not guarantee approval of a business license. Business should not be commenced prior to a license being issued.

1. License fees apply to a calendar year January 1st to December 31st.
2. License fees are pro-rated to half price after August 31st.
3. If the license is approved, license fees are not refundable.

Application date: _____

Type: New Change of Address Out of Town Change of Owner

BUSINESS NAME : (Operating Name)

TELEPHONE NUMBERS:
Business: _____
Fax: _____

OWNER OF BUSINESS and Legal or registered name

Home Phone: _____
E Mail Address: _____
Primary Contacts: (Name and Phone #)

ADDRESS OF BUSINESS:

_____ Postal Code: _____

No. of People Working in the Business
(including owners)
Full Time ___ Part Time ___ Seasonal ___

MAILING ADDRESS: (If different from business address)

_____ Postal Code: _____

Trade Qualification # (if applicable)

Description of Business: Please provide a complete description of your business operations.

BUSINESS PREMISES

Opening Date: _____

What was the previous use of your business premises?

Are Renovations Planned? Yes No

Note: If there is a change in use or structural changes a Building Permit is Required.

No. of Parking Spaces _____

Total Floor Area of Business Premises (sq.ft.) _____

No. of Seats (if a restaurant) _____

No. of rental units (if a property rental business) _____

No. of Employees _____

No. of Vehicles _____

No. of Machines (if a Laundromat, arcade, or vending machine business) _____

APPLICANTS'S ACKNOWLEDGEMENT

I, _____, hereby make application for license in accordance with the particulars as stated in this application, and declare the information in this application to be true and correct. I undertake to supply to the Bylaw Officer all documents, paper or certificates, both requested by this division and required by other Federal, Provincial, Local Government Act or Community Charter and Regulations. I undertake to comply with all Bylaws of the District of Lillooet and all other laws now in force or which may hereafter come into force. I also understand, payment of the Business License fee in advance does not guarantee approval of the license and I cannot commence business until such time as a Business License has been approved and issued.

Signature: _____

Date: _____

ECONOMIC DEVELOPMENT SECTION

The Economic Development Office collects data about the local economy. The information that you provide is summarized and analyzed by the Economic Development Office to measure trends in the local economy and market and promote the municipality.

OWNERSHIP STRUCTURE: (Check one only)

- Proprietorship (single owner, not incorporated)
- Partnership (multiple owners, not incorporated)
- Limited Company (incorporated)
- Other: _____

YEARS IN BUSINESS: _____

What year was the business established in Lillooet?

TYPE OF BUSINESS: (check one only)

- Locally owned and operated (independent)
- Franchise
- Branch (if head office outside Lillooet)
- Other: _____
- Business not located in Lillooet

PRINCIPAL MARKETS:

What are the current principal markets for your products/services? (check all that apply)

- Local - Lillooet Area
- Regional - SLRD, TNRD
- Provincial
- National
- International

BUSINESS PREMISES:

Do you lease/rent or own you business Premises?

- Lease/Rent
- Own

FOR OFFICE USE ONLY

BUSINESS LICENSE # _____ ZONING: _____
 CLASS CODE: _____ SIC # _____
 ANNUAL FEE: _____ FEE PAID: _____
 DATE PAID: _____ CHEQUE ___ CASH ___ DEBIT ___

RESTRICTIONS:

APPROVED:

_____ Date

_____ Bylaw Enforcement Officer
District of Lillooet

APPROVALS:

Planning

Signature: _____

Building

Signature: _____

Fire

Signature: _____

Health

Signature: _____

The information on this form is collected under the authority of the *Community Charter, Local Government Act* and District Bylaws. The information provided will be used to process your application. If you have questions about the use of this information, contact the Bylaw Enforcement Officer at the District of Lillooet Office at:

MAILING ADDRESS: DISTRICT OF LILLOOET
615 MAIN STREET
P.O. BOX 610,
LILLOOET, B.C.
VOK 1V0

TEL: 250-256-4289
FAX: 250-256-4288

VISIT THE DISTRICT'S WEBSITE AT: www.lillooetbc.com

Referred to Utilities Department

DATE