



BUSINESS LICENSE APPLICATION

Is the Business temporary? [] Yes [] No, If yes, start date: _____ End date: _____
New Business [] Existing Business; if existing, year established _____ Home-based Business? [] Yes [] No

SECTION A - BUSINESS CONTACT INFORMATION

Business Name: _____
Legal Business Name: _____ [] Headquarters [] New Branch
Mailing Address: _____ City: _____ Province: _____ Postal Code: _____
Business Phone No.: _____ Cell: _____ Fax: _____
Business Email: _____ Contact Name(s): _____ Title: _____
Website: _____
Business Location (Civic Address): _____ Postal Code: _____
Legal Subdivision: Lot: _____ Block: _____ Plan: _____
Part of: [] NE [] NW [] SE [] SW 1/4 Section: _____ Township: _____ Range: _____ West of: _____ M

SECTION B - BUSINESS OPERATION DETAILS

Describe the business operation / what services and/or products do you offer the customer?
Number of Employees (approximate): _____
Will the business be advertised / marketed / have a sign? [] Yes [] No If yes, list Advertising / Marketing / Signage Details: _____

Check off the category or categories that best describes your business (maximum of 2) (1 is primary business, 2 is secondary business).

- Accounting/Office Business, Agriculture/Ag Services, Animal Services/Supplies, Artisan/Giftware, Automotive, Beauty Salons/Spas, Builders - Home/Commercial/Industrial, Building Contracting/Services, Building Materials/Supplies, Cleaning Services, Clothing Sales/Alterations, Computer/Communications, Educational Services, Emergency/Security Services, Entertainment, Equipment Construction, Financial/Insurance Services, Gas Bar/Convenience Store/Fuel, Groceries/Catering/Liquor, Hotels/Motels/Bed & Breakfast, Landscaping/Yard Maintenance/Snow Removal, Manufacturers/Distributors, Medical/Health Services, Oilfield Services/Supplies, Other Services, Personal Services, Plumbing/Heating/Electrical, Professional Services, Real Estate, Recycling/Waste Management, Restaurants/Coffee Shops, Retail Sales, Safety Training/Supplies, Storage/Rental Services, Training/Employment Services, Travel Services, Transportation, Utility Providers, Welding Supplies/Services

SECTION C - OPPORTUNITY INCLUSION

Would you like to be listed on the Red Deer County website business directory? [] Yes [] No
Would you like to be notified of networking opportunities within the County? [] Yes [] No
Would you like to subscribe to the Red Deer County News? [] Yes [] No

SECTION D - FINAL AUTHORIZATION

I hereby make application and acknowledge that the above information is, to the best of my knowledge, true and accurate.

Applicant's Signature _____ Title (Owner, Operator etc.) _____ Date _____

PAYMENT INFORMATION

[] Cash [] Debit [] Credit Card [] Cheque No.: _____ Or [] Call for Payment (credit card only)
Credit Card No.: _____ Exp Date: _____
Name on Card: _____ Signature of cardholder: _____

FOR OFFICE USE ONLY

Date Received: _____ File Number: _____ Legal File No.: _____
Application Fee: _____ DP No.: _____ Linc No.: _____
Roll No.: _____ Diamond No.: _____ Region: _____ Division: _____
NAICS Code: _____ Receipt No.: _____
Date Accepted _____ Accepted by (please print) _____ Signature _____