



THE CORPORATION OF THE CITY OF VERNON

BUSINESS LICENCE APPLICATION

Phone 250-550-3585 – Fax 250-549-1535 – Mailing – 3400 30th Street, Vernon, BC V1T 5E6
www.vernon.ca

NEW []
CHANGE []
CANCEL []

Business Information: Business Trade Name:
Location:
Mailing Address:
City: Prov: BC Postal Code:
Bus Phone: Fax:
Contact Person:
Emergency Contact Person:

Owner Information:
Name(s):
Address:
City/Province: Postal Code:
Private Ph: Cell:
Email:
Phone:
Comm. Flr. Area: (sq.ft)

Type/Description of Business to be Conducted: T.Q.#
Home Occupation: Yes [] No [] Type: Minor [] Major [] Rural []
Is the above Business Location currently under construction and/or renovation? Yes [] No []
Is the above Business Location to be renovated prior to opening the business? Yes [] No []
Type of Construction/Renovation:
Does the above Business Location require NEW or ALTERED signage? Yes [] No []
IC Mobile Licencing Option (Eligible Businesses Only)
Yes [] No []

Food/Liquor Services Only:
Number of Seats: Liquor Licence: Yes [] No []

Hair/Esthetic Services Only:
Number of Salon Chairs:

Accommodation Services Only:
Number of Units:

I, We _____, hereby make application for a licence in accordance with the particulars as above stated and declare that the above statement is true and correct. I undertake that if granted the licence applied for, I will comply with each and every obligation contained in all the Laws and Bylaws now in force or which may hereafter come into force in The Corporation of the City of Vernon. I further understand, that if this application involves the use of premises for business purposes that they may not be occupied until they have been inspected by the authorities concerned and a licence issued. I also understand, that the payment of the Business Licence fee in advance does not guarantee approval.

Signature of Applicant Name (Printed Please) Date
Note: There will be a non-refundable application fee (in addition to the licence fee as calculated). Please include the non-refundable application fee when submitting your application. For an explanation of regulations and fees, please review the Business Licence Bylaw #5480 by visiting www.vernon.ca Personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act and will be used only for the purposes of responding to your request. The information on this form is collected under the authority of the current City of Vernon Business Licence Bylaw for the purposes related to this bylaw. Business Licences issued as a result of the application will be routinely available to the public. Any questions regarding the collection, retention and distribution of the information should be directed to the City of Vernon Head of Freedom of Information.

FOR OFFICE USE ONLY

LICENCE No. _____
CLASSIFICATION CODE _____
CLASS DESCRIPTION _____
ANNUAL LICENCE FEE \$ _____ TOTAL \$ _____
RES. BUS. [] HOME OCC. [] NON-RES BUS. []
ZONING DESIGNATION _____
PROPERTY ROLL # _____
APPROVAL DATE _____
COMMENTS _____

APPROVALS REQUIRED (X)
() _____ / _____ / _____
Building Inspector Date (Y/M/D)
() _____ / _____ / _____
Fire Chief or Inspector Date (Y/M/D)
() _____ / _____ / _____
Environmental Health Officer Date (Y/M/D)
() _____ / _____ / _____
Dir. Of C.D.D. or Planning Asst. Date (Y/M/D)
(X) _____ / _____ / _____
Business Licence Inspector Date (Y/M/D)

H.O. Regulations Apply: [] Minor [] Major [] Rural [] Change of Ownership Only [] Change of Location Only