



THE CORPORATION OF THE TOWN OF SAUGEEN SHORES

PO Box 820, 600 Tomlinson Drive, Port Elgin, Ontario N0H 2C0

Phone: 519-832-2008

Fax: 519-832-2140

BUSINESS LICENCE APPLICATION

TYPE OF APPLICATION (check one)

Temporary Sales Vehicle Services Refreshment Vehicle

Entertainment Events Circus Menagerie

Place of Amusement

APPLICANT INFORMATION

Name _____

Address _____

Town _____ Postal Code _____

Phone _____ Email _____ Fax _____

OWNER/OPERATOR INFORMATION (if different from applicant)

Name _____

Address _____

Town Postal Code _____

Phone _____ Email _____ Fax _____

PROPOSED BUSINESS INFORMATION

Name of Business _____

Proposed Location of Business _____

Describe in Detail the Event/Business/Goods being offered for sale _____

Hours of Operation _____

Proposed Date of Opening or Date of each Event _____

Proof of Insurance must be accompany the application

Date _____ Signature of Applicant _____

Date _____ Signature of Owner/Operator _____

Personal Information contained on this Form is collected pursuant to the Freedom of Information and Protection of Privacy Act / Municipal Freedom of Information and Protection of Privacy Act and will be used for the purpose of responding to your request. Questions about this collection should be directed to the Freedom of Information and Privacy Co-ordinator at the Town of Saugeen Shores.