



# APPLICATION for Business License

Town of Drayton Valley  
Planning & Development Department  
5120 – 52<sup>nd</sup> Street, Box 6837  
Drayton Valley, AB T7A 1A1  
Phone: (780) 514-2200  
Fax: (780) 542-5753  
www.draytonvalley.ca

**FOR BUSINESSES TO BE OPERATED IN COMMERCIAL & INDUSTRIAL ZONED AREAS ONLY**

All Sections Must Be Completed In FULL  
~PLEASE PRINT~

### OFFICE USE ONLY

License #: \_\_\_\_\_ Customer #: \_\_\_\_\_  
Application Fee: \$ \_\_\_\_\_ Receipt #: \_\_\_\_\_  
Date Received: \_\_\_\_\_  
Date Issued: \_\_\_\_\_

### APPLICANT INFORMATION (to be completed by the individual making application for Business License)

Applicant's Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_  
(City) (Province) (Postal Code)

Work Phone: (\_\_\_\_) \_\_\_\_\_; Home Phone: (\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_; Fax: (\_\_\_\_) \_\_\_\_\_

### BUSINESS INFORMATION (information specific to the proposed business operations)

Legal Business Name (if registered corporation): \_\_\_\_\_

Operating Business Name: \_\_\_\_\_

Number of Employees: Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_

Business Legal Land Description: Lot \_\_\_\_\_, Block \_\_\_\_\_, Plan \_\_\_\_\_ Zoning: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_  
(City) (Province) (Postal Code)

Business Street Address: \_\_\_\_\_  
(City) (Province) (Postal Code)

Business Owner's Name: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_; Business Phone: (\_\_\_\_) \_\_\_\_\_; Cell Phone: (\_\_\_\_) \_\_\_\_\_

Business Owner's Address: \_\_\_\_\_  
(City) (Province) (Postal Code)

Business Description (please be specific – ie: "retail – sporting goods and clothing"):

\_\_\_\_\_  
\_\_\_\_\_

Information supplied in this section will be made available to the public to assist in marketing your business through printed and web directories, such as the Town's webpage and AlbertaFirst.com.

### REGISTERED LAND OWNER (to be completed by registered landowner, as noted on a Certificate of Title.)

I, (Print Name) \_\_\_\_\_, hereby certify that:

1. I am the registered owner of the land described above; or
1. I am the representative of the registered owner of the land described above (explanation of signing authority – ie. "director of company", "property manager") \_\_\_\_\_\*
2. I am aware of the business being operated on my property by the above-noted party, and hereby consent to such use.

Signature: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(City) (Province) (Postal Code)

Phone No.: (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
(Home) (Work)

\* Proof of signing authority may be required prior to issuance of Business License.

CONTINUED ON REVERSE ...



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## DETAILS OF PROPOSED DEVELOPMENT FOR BUSINESS

1. Are you renovating or altering the building to accommodate the business? Yes No  
*If yes, you must make separate application for Development Permit and/or Building Permit, as required and return same with this Business License Application.*

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

### NOTES:

- Any activity carried out prior to obtaining the required Permit Approval(s) signed by an authorized Development Officer of the Town of Drayton Valley and prior to the appeal expiry date is at the applicant's own risk.
- The information on this form is collected under the authority of Paragraph 32c of *The Alberta Freedom of Information and Protection of Privacy Act*, RSA, 2000, Ch. F-18.5, and shall only be used for the purpose for which it was collected.
- Advice of any change of ownership, closure, etc., must be provided to the Town in writing. Failure to provide such notice may result in a penalty.

FOR OFFICE USE ONLY		
Zoning: _____	Permitted Use / Discretionary Use	Referral Required: Yes / No
Approved / Refused	_____ Planning & Development Officer	_____ Date