



TOWN OF GOLDEN
 810 9th Ave S
 PO Box 350
 Golden, BC V0A 1H0
 BusinessLicense@Golden.ca

Schedule 'B'
 Attached to and forming part of
 Bylaw Number 990, cited as
 "Trade License Bylaw Number
 990, 1996

SCHEDULE 'B'

*** Computer No.:** _____

Firm or Business: _____

Name of Licensee: _____

Use and Type of Business to be Conducted: _____

*** Section(s) Licensed Under:** _____

*** Class of Business:** _____

Location of Business: _____

Manager Name and Address: _____

Phone: _____

E-mail Address: _____ Other Phone (i.e. cell): _____

Total of:

1) Trades: _____ 6) Rooms: _____

2) Sq. Ft./Bldg.: _____ 7) Tables: _____

3) Sq. Ft./Used Area: _____ 8) Lanes: _____

4) Seats/Chairs: _____ 9) Persons Employed: _____

5) Units: _____ 10) Other: _____

Business Mailing Address: _____

Phone: same as above _____

*** Legal Description:** _____ **Roll #** _____

Owner of Premises: _____

Opening Date: _____

Type of Business: New: _____ Existing: _____

If existing, are renovations planned: _____

Company Registration: _____ (Business Number or GST or PST)

*** References:** _____

Trade Qualifications Certificate No.: _____ (Attach a Copy)

I/We _____ hereby make application for a license in accordance with the particulars as above stated and declare the above statements are true and correct and I undertake that if I am granted the license 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 Town of Golden, British Columbia.

Dated: _____

Signature of Applicants: _____

*** Remarks from License Inspector:** _____

*** SHADED/STARED Areas for Office use only** Inspector to indicate if ONE year only