

In Village Business License Application

All fields on this application form must be completed before an application can be processed. If any of the fields do not apply to your business please indicate this with "N/A".

Business shall not commence prior to a license being issued.

STEP 1: CONTACT INFORMATION

Business / Operating Name:					
Business Address:					
Lot: Block: Plan:					
Mailing Address Mailing address is the same as the business address					
Business Phone Number:					
Business Email:Business Website: I consent to communication by email.					
Business Owner's Name(s):					
Applicant Name (if different than owner):					
Address of the Applicant:					
Postal Code:					
Phone Number:					
GST Number:					
Property Owner/Landlord:					
Mailing Address:Postal Code					
Phone No: Email Address:					
□ I would like the above information included in the Village of Halkirk Business Directory on www.halkirk.ca . (Owner contact will not be listed unless otherwise specified.)					
- Now business license application					
□ New business license application					
Are you or anyone else doing interior alterations OR construction OR change of use to your business location?					
□ No □ Yes – NOTE: You will need to fill out the Development Permit application form in addition to this form					

STEP 2: BUSINESS ACTIVITIES

Business Ownership Information					
□ Corporation or Corporate Partnership (prov	vide legal name):				
Corporation Access Number:	Alberta, or other province				
□ Charitable Organization (provide Charity Registration Number):					
□ Sole Proprietor or Partnership (provide names of proprietor & partners):					
Does your business operate under a Trac	le Name? If yes, what is it?				
What products or services does your business provide?					
STEP 3: CHANGES TO AN EXISTING B	USINESS LICENSE (If Applicable)				
	,				
Current Business Address:					
Business Name:					

Please indicate what the change was:					
□ Moved to a new location for an existing business (no change in ownership or operations)					
New address is:					
Lot:Block:Plan:					
Mailing Address:					
□ Mailing address is the same as the new address					
Business Phone Number:					
Business Email:					
Business Website:					
□ New Legal Entity:					
□ New Trade Name:					
□ Bought an existing business – If the previous company was operated as a Ltd. or Inc.					
company Did you buy the Ltd. Or Inc. company (Legal entity)? □ Yes □ No					
Did you only buy the equipment/assets of the business? □ Yes □ No					
□ Changed Operations (i.e. was retail now restaurant, please describe):					
□ Other (please explain):					
BUSINESS OWNER DECLARATION: I, (<i>Please print</i>)					
refused.					
Dated thisday of, 20					
□ Business Owner:Signature					
□ Authorized Agent:Signature					
□ Property Owner/Landlord:Signature (Affix corporate seal(s) if applicable)					

Payment Information

Licenses are not issued until all license fees are paid. Business license fees vary depending on the category(s) your operations are classified into.

If applying in person, payment options are: cash, cheque, credit card & debit card.

If applying by email or mail: we will call you at the time of application processing to advise you of the cost of your license and you may pay by credit card, or mail a cheque.

Normal office hours are Monday to Thursday, 8:00 a.m.—4:30 p.m., Friday 8:00 a.m.—1:00 p.m., with the exception of closures for holidays.

FOR OFFICE USE ONLY						
Prerequisite Information Development Permit required? Permitted Use Discretionary Use: Building Permit required? Demolition Permit required? Sign Permit required? Additional requirements met?	Yes No Yes No Yes No Yes No Yes No Yes No Yes No	If approved: #				
Business License Information: Only processed after prerequisites have been approved and received Business License Categories to be processed: Home Office Home Occupation Commercial Industrial Exempt Multi-Commercial Classification No. Fees Paid: \$						

The information being collected on this form is for the purpose determining the applicant's eligibility to be granted a Village of Halkirk business license, pursuant to the provisions of the Municipal Government Act, Section 8(b) (v), and the Freedom of Information and Protection of Privacy Act, Section 33(c). This information may be shared with applicable Village of Halkirk departments, agencies, RCMP, and/or Alberta Health Services, for the purpose of conducting required inspections and approvals, as part of the Business License application process.

Return completed form along with the applicable application fee to:

The Village of Halkirk 103 Main Street PO Box 126 Halkirk, AB T0C 1M0

Fax: 403-884-2113

Email: CAO@VillageofHalkirk.ca