



RETURN TO:
 1102 Fourth Street
 Estevan, Saskatchewan
 Canada
 S4A 0W7

**CITY OF ESTEVAN
 BUSINESS LICENSE APPLICATION**

Certificate Number

Business Information (Please Print Clearly)	
Business Name	Business Address
Business Phone	Business Fax
Applicant Primary Email Address	Website
Applicant Name (First, Middle Initial, Surname)	Applicant Contact Primary Phone Number
Business Description (Please Print Clearly)	
Please describe the primary function of the business If needed please attach a blank piece of paper for more space	Area of the premise where business will be carried out
Owner Information (Please Print Clearly) (eg. Sole Proprietor, Head Office, Primary Company, etc.)	
Owner Name (First, Middle Initial, Surname)	Owner Company Name
Owner Mailing Address (Street, City, Province, Postal Code)	Owner Primary Phone
Owner Fax	
Manager Information (Please Print Clearly)	
Manager Name (First, Middle Initial, Surname)	Manager Mailing Address (Street, City, Province, Postal Code)
Manager Primary Phone	

Date of Application (mm/dd/yy): _____

Declaration of Applicant

I hereby certify that all statements contained within this application are true, and I make this solemn declaration conscientiously believing it to be true, and knowing that it is the same force and effect as if made under oath, and by virtue of the *Canada Evidence Act*.

 Applicant's Signature

 Date

OFFICE USE ONLY

Approved

 Authorizing Signature

 Date

A COPY OF PROOF OF REGISTRATION OF THE BUSINESS NAME WITH THE CORPORATIONS BRANCH (SASKATCHEWAN) OR EQUIVALENT FEDERAL OR PROVINCIAL AGENCY MUST BE ATTACHED.

A copy of any certificate, authority, license or other document of qualification under this or any other Bylaw, or under Statute of Canada or the Province of Saskatchewan that may be required in connection with the carrying on of business must also be attached.

Make cheques payable to: City of Estevan

Forward the completed application form, any necessary supporting documents to:

City of Estevan
1102 4th Street
Estevan SK S4A 0W7

For more information contact us at: bclerk@estevan.ca or call (306) 634-1812

CHECKLIST

- REGISTRATION
- CERTIFICATE
- CHEQUE