



# TOWN OF CHESTERMERE

## BUSINESS LICENSE APPLICATION

All fields on this Application form must be completed before the application can be processed.

If any fields are irrelevant to your business, please indicate this by entering "NA"

BUSINESS INFORMATION			
Business Name			
Business Type			
Street Address			
Mailing Address			
Phone		Fax	
Website			

PRIMARY AND SECONDARY CONTACTS			
Name		Title	
Phone		Alternate Phone	
Fax		Email	
Name		Title	
Phone		Alternate Phone	
Fax		Email	

IN CASE OF EMERGENCY							
The following information will be used in cases of Emergency. Please list those people that have 24 Hrs Access to your business Location							
Contact Name 1						Phone 1	
Keyholder (Y / N)	YES		NO			Phone 2	
Contact Name 2						Phone 1	
Keyholder (Y / N)	YES		NO			Phone 2	
Contact Name 3						Phone 1	
Keyholder (Y / N)	YES		NO			Phone 2	
Are any DANGEROUS GOODS or CHEMICALS stored at the Business Location?							
If Yes, Identify.							

ALARM INFORMATION	
If your business is alarmed, please identify any of the above contacts that have the password/code.	

PRE-REQUISITE			
The Food Establishment Permit or copy of your Health Inspection form issued by the Calgary Health Region, Environmental Health MUST be attached to your application form. (Contact the Health Inspector at 943-8060 should you require more info)			
CALGARY HEALTH REGION #			
As a contractor, are you accepting pre-payments from clients? circle one)	YES		NO
If yes, please provide proof of Provincial Licensing			

DECLARATION	
I hereby certify that all information given in this application is true to the best of my knowledge.	
SIGNATURE OF BUSINESS OWNER	
DATE (yy/mm/dd)	

Application Type (circle one):	New	Transfer of Ownership	Day License	Name Change
License Number:	Amount Paid		Date:	

The information on this form is collected under the authority of bylaw 002-06 and the FOIPP Act and is used for purposes related to carrying on a business within the Town of Chestermere. The relevant departments/committees within the Town Of Chestermere that would access the information on this form are Economics Development, committees, Emergency, and Protective Services Questions about the collection of the following information can be directed to Town Of Chestermere, 105 Marina Rd, 207-7050