

Business License Application



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Calmar.ca

_____ Year _____ New _____ Renewal
_____ Town _____ 39-20 Regional _____ Additional (+\$50.00)

Business & Owner(s) Name: _____

Business Type/Service/Product: _____

Civic Address of Business: _____

Street Town Postal Code

Mailing Address: _____

Unit/ PO Box # Street Postal Code

Email Address: _____ Business Phone #: _____

Cell #: _____ Business Days: _____

Business Hours: _____ Website: _____

Emergency Contact: _____ Phone Number: _____

Social Media: _____ Service Area: _____

E.g. Leduc Region, Alberta

Will there be storage on the premises? ___ Yes ___ No Type of storage: _____

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

Applicant's Name: _____ Applicant's Address: _____ Town / Hamlet: _____

Province: _____ Postal Code: _____

Work Phone: (____) _____; Home Phone: (____) _____ Cell Phone: (____) _____; Fax: (____) _____

BUSINESS DETAILS

Legal Business Name (if registered corporation): _____

Date the business was established: _____

Operating Business Name: _____

Type of Business: Commercial: _____ Industrial: _____ Home-Based: _____ Farm: _____ Agri-Business: _____

Business Legal Land Description: Lot _____ Block _____ Plan _____ Zoning: _____

Business Mailing Address: _____ Town _____ Province: _____ Postal Code: _____

Business Street Address: _____ Town _____ Province: _____ Postal Code: _____

Business Contact Name: _____ E-mail address: _____

Business Phone: (____) _____; Cell Phone: (____) _____

Description of products or services: (please be specific – i.e.: "retail – sporting goods and clothing / Oil & Gas – Manufacturing")

Information for Calmar based businesses supplied in the Applicant Information and the Business Details sections may be public to assist in marketing your business through Calmar's website Business Directory.

BUSINESS INFORMATION

Years in Business: _____ In this location: _____ Rent / Own: _____ Employees: F/T: _____

_____ P/T: _____ Admin: _____ Management: _____ skilled _____ Unskilled _____

Expanding / Downsizing: _____

Diversifying: _____

Staff Turn-Over No.: F/T: _____ P/T: _____, Skilled _____ Unskilled: _____ Admin: _____

Describe market: (local, domestic, foreign) _____

Import Goods from within Canada: _____ Within Alberta: _____ From EU: _____ From Asia: _____

Export Goods within Canada: _____ Within Alberta: _____ To The EU: _____ To Asia: _____

Type of Ownership: Sole Proprietorship: _____ Partnership: _____ Limited Corp: _____ Not-For-Profit: _____
 Locally Owned: _____ Franchise: _____ Branch: _____ Other: _____
 Business Owner's Name: _____ E-mail address: _____
 Home Phone: (_____) _____; Business Phone: (_____) _____; Cell Phone: (_____) _____
 Business Owner's Address: _____ City: _____ Province: _____ Postal Code: _____
 Property Owner (if different from Business Owner) _____ Phone: _____
 Describe your short and long-term goals for your business: _____

For one-time license, where is your work being conducted: _____

Is there something the Town of Calmar can do to support you in your business? Would you attend business webinars / training?

Information supplied by Calmar based businesses in the Business Information section will NOT be made available to the public through Calmar's website Business Directory unless authorized by the Applicant listed above.

BUSINESS DIRECTORY INFORMATION

Company Tag Line: _____

Description of Business products and / or services:

I/we, the undersigned:

1. Accept full responsibility that the information on this application is true and correct;
2. Accept full responsibility for any and all liability related in the day-to-day conduct of the above stated business;
3. Absolve the Town of Calmar of any and all liability whatsoever, which may result from the day-to-day conduct of the above-stated business.
4. I/We give consent for the information provided to be listed on the Calmar website & printed directory.

Signature: _____ Date: _____

OFFICE USE ONLY

Receipt #: _____ Fee: _____ Approved: _____ Paid: _____

Land Use Classification _____ Business License #: _____

Refused _____ Comments: _____

(Development Permit application may be required and subsequently obtained prior to issuance of Business License) Business licenses expire December 31st and must be renewed annually by January 31st. New license fees are reduced to 1/2 when purchased after August 31st in any license year.

- | | |
|---------------------------------------|--|
| _____ Home Based Business | _____ Hawker/Peddler Single Project |
| _____ Resident Business | _____ Renewal |
| _____ Non-Resident Business | _____ One Time Special Event |
| _____ General Contractor | _____ Name Change & Transfer of Business |
| _____ Non-Resident General Contractor | _____ Micro Business |