



10511 – 103 Street
 High Level, AB
 T0H 1Z0
 Ph: 780-926-2201
 Fax: 780-926-2899

Business License

Application Form

Businesses operating in the Town of High Level are required to have a valid business license. The information requested in this application is necessary to complete a full evaluation of your request for a business license.

Business shall not commence prior to a license being issued.

- 1.) License fees apply to a calendar year Jan 1st to Dec 31st
- 2.) If the license is approved, license fees are non-refundable.
- 3.) Please be advised you may be required to obtain a development or building permit.

OFFICIAL USE ONLY

Business License #	Non-Refundable Fee	Date Received	Date Approved	Receipt Number
	\$			

Application Date:	Type of Application
	<input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Change of address <input type="checkbox"/> Out of Town

Business Information

Business Name (Operating name)	Business Number
Location of Business	Mailing Address (If different from business address)
Address: City/Town: Province: Postal Code:	Address: City/Town: Province: Postal Code:
Owner of Business (and Legal or registered name)	Phone Number(s)
	Business Number: Cellphone: Other: Fax:
Number of People Working in the Business (Including owners)	Trade Qualification or Certification Number (If applicable)
Full Time	
Part Time	
Seasonal	



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<p>Description of Business: please provide a complete description of your business operations.</p>

<p>Emergency Contact</p>

<p>Name :</p>
<p>Phone:</p>

High Level Chamber of Commerce

<input type="checkbox"/>	<p>The Town of High Level has my permission to share my business information with the High Level Chamber of Commerce.</p>
<input type="checkbox"/>	<p>The Town of High Level has my permission to share my business information on the Town of High Level Website Under the Business Directory (http://www.highlevel.ca/141/Business-Directory)</p>

Website (If applicable)	Business Email
<p>Please send a digital copy of your business logo (png, jpeg, bmp,) to lhauk@highlevel.ca (if applicable)</p>	

APPLICANT'S ACKNOWLEDGEMENT

I, _____ hereby make application for a license in accordance with the particulars as stated in this application, and declare the information in the application to be true and correct. I undertake to supply to the Deputy License Inspector all documents, paper or certificates both requested by this division and required by other Federal, Provincial or Municipal Act and Regulations. I undertake to comply with all Bylaws of the Town of High Level and all other laws now in force or which may hereinafter come into force. I also understand, payment of the Business license fee in advance does not guarantee approval of the license and **I cannot commence business until such time as a Business License has been approved and issued.**

Signature	Date



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Method of Payment		Approvals Attached	
<input type="checkbox"/> Cheque <input type="checkbox"/> Debit <input type="checkbox"/> Credit Card <input type="checkbox"/> Cash <input type="checkbox"/> Other _____		<input type="checkbox"/> Building Inspector <input type="checkbox"/> N/A <input type="checkbox"/> Planning Department <input type="checkbox"/> N/A <input type="checkbox"/> Fire Department <input type="checkbox"/> N/A <input type="checkbox"/> Health Inspector <input type="checkbox"/> N/A <input type="checkbox"/> Operations <input type="checkbox"/> N/A	
Card Number			
	CVC/CVV		EXP
License Inspector Signature		Date	

Personal information on this form is collected in accordance with Section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act and will be solely used for the stated purpose. If you have any questions about the collection, use, or disclosure of this information, please contact the Municipal Clerk at 780-821-4008.