



**TOWN OF BARRHEAD
BUSINESS LICENCE APPLICATION**

Box 4189, 5014-50 Avenue, Barrhead, AB T7N 1A2

Phone: (780) 674-3301 Fax: (780) 674-5648 e-mail: town@barrhead.ca

Application Date: _____ New Renewal

Application Type: Annual Hawkers/Peddlers/Door to Door Sales
Temporary General Contractor

See Business Licence Application Fee Schedule for Relevant Licence Fees

SECTION 1: APPLICANT/OWNER INFORMATION

Name: _____ Phone: _____

Address: _____ Postal Code: _____

Email: _____

SECTION 2: BUSINESS INFORMATION

To Be Published On Town Website:

Business Name: _____

Address: _____ Postal Code: _____

Phone: _____ Fax: _____

E-mail: _____ Website: _____

Type of Business: _____

AMVIC Registration Number (if applicable): _____

Provincial Business Licence Number (if applicable): _____

Food Handling Permit issued by Alberta Health Services (if applicable)? Yes No

Number of Employees: _____

Emergency Contact (in case of fire etc.)

Name: _____ Phone: _____

SECTION 3: HAZARDOUS MATERIALS

Are any dangerous goods or chemicals stored at the business location? Yes No

If yes, please provide product description: _____

Quantity of hazardous product: _____ Product I.D. No. (PIN) _____

What type of storage containers are the products in? (i.e. bulk, drum, cylinders, etc.):

Where are the hazardous products stored on the property? _____

Is building equipped with a Wastewater Interceptor (ie Grease Trap, Oil Interceptor)? _____

Required by National Plumbing Code of Canada and Town of Barrhead Municipal Public Utilities Bylaw for any business that discharges harmful substances into the sewer system. Failure to comply may result in penalties in accordance with Municipal Public Utilities Bylaw.

SECTION 4: SIGNATURE

The information given on this application is full and complete and is to the best of my knowledge a true statement of facts in relation to this application for Business Licence.

Date

Signature of Applicant

*Please submit completed application to the Town of Barrhead, Box 4189,
5014-50 Avenue, Barrhead, AB T7N 1A2, email to town@barrhead.ca or fax to 780-674-5648.*

For Office Use Only

Licence No: _____ Amount Paid: _____ Receipt No.: _____

Date

Signature of Development Officer