



**VILLAGE OF FORESTBURG
APPLICATION FOR BUSINESS LICENSE**

Business Name: _____

Owner's Name: _____

Mailing Address: _____

Business Location: _____ Door to Door Sales: _____

If Located At Your Residence, Indicate The Area of Home/ Accessory Building Used for Business Purposes:

_____ sq meters of total _____ sq meters

Description of Business Activity: _____

Number of Employees: _____

Hours of Operation: _____

Provincial License #: _____

I hereby make application to the Village of Forestburg for a Business License for the year _____.

I understand that the Village of Forestburg Licensing Officer may inspect my business premises before issuing the license.

In the case of a new business, I have the building and/or development permits are required.

Date: _____

Signature (s) _____

Please remit completed form along with payment to:

*Village of Forestburg
Box 210
Forestburg, Alberta, T0B 1N0*

Phone: 780 582 3668

Fax: 780 582 2233