

SCHEDULE 1
FORM A

TOWN OF SEXSMITH – APPLICATION FOR BUSINESS LICENCE

I, _____ of _____
(name in full) (complete address)

(occupation) (name of company or business)

Business Address _____

(business phone) (alternate phone)

(fax number) (e-mail address if applicable)

Hereby apply for a licence under the Business Licence Bylaw for the purpose of carrying on the
business of _____

o/a _____
(if different than above)

By signing the business license, you are aware of the regulations provided in the *Consumer Protection Act* as well as the federal and provincial legislation that pertains to your business. For more information on the *Consumer Protection Act* please visit the following site: <http://www.qp.alberta.ca/documents/Acts/c26p3.pdf>

Signature_____
Date_____
TitleAccepted ☐Rejected ☐_____
Date_____
CAO

Reason for Rejection _____

Appeal to the Council of the Town of Sexsmith this _____ day of _____, 20____.

Allowed ☐Disallowed ☐_____
Date_____
Mayor

Personal information on this form is collected pursuant to Section 33(c) of the *Freedom of Information and Protection of Privacy Act (FOIP)* for the purpose of operating the Town of Sexsmith's business licensing program and for the purpose of law enforcement, and is subject to *FOIP*. If you have any questions about the collection and use of this information, please contact the Town of Sexsmith at 780-568-3681.