City of Prince Albert

Commercial Business License Application

For Office Use Only:

Application Date: _____ BL_____ CUST ID: _____ Total Fees Due: _____

Application Type (Check and complete all that apply)

☐ New Business License   **$100**
☐ New Business License after July 1st   **$50**
☐ Annual Renewal   **$100**
☐ Inter-Municipal Business License*   **$250***

*Must also have an annual business license in one of the participating municipalities:
☐ The City of Prince Albert ☐ The Town of Shellbrook
☐ The Town of Rosthern ☐ The Town of Duck Lake
Business License Number: _____

☐ Change of Information   **No Fee – Entire Application Must Be Completed**

     ☐ Address ☐ Mailing ☐ Location   Previous Address: _____
     ☐ Business Name   Previous Business Name: _____
     ☐ Ownership   Previous Owner: _____
     ☐ Use   Previous Use: _____   New Use: _____

Forward the <u>completed</u> application form, and any other required documents, and payment to:
OR email application to solutions@citypa.com

Please make the cheque payable to: The City of Prince Albert

The City of Prince Albert
Community Development Department
1084 Central Avenue
Prince Albert, SK S6V 7P3

Business Information (Please print clearly)   ☐ **I do not want this address on the Business License Directory**

Business Name: _____

Address: _____ Prince Albert   SK _____
    Unit #   Building #   Street Name   City   Province   Postal Code

Contact: _____   Phone: _____

Email: _____   Fax: _____

Website: _____   No. of Employees (including self): Full Time:_____ Part Time:_____

*PST #: _____   ***ISC Entity #:** _____

*AT LEAST ONE OF THE NUMBERS IS REQUIRED

Business Description (Please print clearly)
Please describe the primary function of the business:

_____
_____

Proposed Opening Date: _____

Business Owner Information (Please print clearly)   <u>All mail will be sent to the address listed in this section</u>

☐ Same as Above

Owner Name: _____

Company Name: _____

Mailing Address: _____
    Unit #   Building #   Street Name

    City   Province/State   Postal/Zip Code

Phone: _____   Fax: _____

Email: _____

Business Type (Please check one)

☐ Co-operative   ☐ Corporation (closely held)   ☐ Corporation (public)
☐ Partnership   ☐ Sole Proprietorship   ☐ No Answer

Business Use (Please check one)

- ☐ Retail
- ☐ Personal Services
- ☐ Hotel/ Restaurant
- ☐ Wholesale/Distribution
- ☐ Agriculture
- ☐ Construction/ Contractor
- ☐ Public Utilities
- ☐ Transportation
- ☐ Manufacturing/ Processing
- ☐ Education
- ☐ Finance/ Insurance/ Real Estate
- ☐ Other - Please specify: _____

Please Note: This is an application only.
If your application is approved, you will receive confirmation from the Community Development Department. Your application is not approved until you receive your license from the City of Prince Albert.

You may be required to apply for additional permits or site inspections with the Planning and Building Divisions of the Community Development Department before your application may be approved.

- ❖ The *Business License Bylaw* No. 32 of 2020 requires all businesses to obtain a Business License before beginning operation.
- ❖ Every license will be valid until the end of each calendar year (December 31).
- ❖ Changes to the information on the application (location, ownership, business name, use) requires a new application to be submitted to the Community Development Department in order for the license to be updated and considered valid.
- ❖ The City of Prince Albert license must be displayed prominently at the place of business.

For more information on licensing requirements, please call 306.953.4884 or visit our website at www.citypa.ca.

For more information on City bylaws and policies, please visit our website at www.citypa.ca .

Acknowledgement of Responsibility:

- I am aware that a business license is non-transferable for ownership, use or location change without reapplication for the change of information.
- I am aware that the Community Development Department must be notified if the business is discontinued in order to avoid renewal fees for the following year.
- I agree to operate my business as required under the *Business License Bylaw*.

Applicant Signature: _____   Date: _____