DISTRICT OF STEWART

BUSINESS LICENCE AMENDING BYLAW No.927, 2018

A BYLAW TO UPDATE THE APPLICATION FORM IN BYLAW NO. 864, 2013

WHEREAS Council wishes to amend Schedule "B" by repealing Schedule "B" attached to and forming part of Bylaw No. 864, 2013 and replacing with Schedule "B" attached to and forming part of Bylaw No. 927, 2018.

NOW, THEREFORE, the Council of the District of Stewart, in open meeting assembled, enacts as follows:

THAT Schedule "B" be amended by repealing Schedule "B" attached to and forming part of Bylaw No. 864, 2013 and be replaced with Schedule "B" attached to and forming part of Bylaw No. 927, 2018.

CITATION

1. This Bylaw shall be cited as "BUSINESS LICENCE AMENDING BYLAW NO. 927, 2018".

SEVERANCE

- 2. If a Court of competent jurisdiction declares any phrase, sentence or section of this Bylaw as being invalid, then the invalid portion shall be severed and the severance shall not affect the validity of the remainder.
- 3. Unless specifically provided for elsewhere in this Bylaw, this Bylaw shall come into full force upon adoption.

READ A FIRST TIME this 25th day of June, 2018.

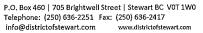
READ A SECOND TIME this 25th day of June, 2018.

READ A THIRD TIME this 25th day of June, 2018.

ADOPTED this 9th day of July, 2018.

Corporate Officer

Kinall Pay





Business Licence Application

Businesses operating in the District of Stewart are required to have a valid business licence. The information requested in this application is necessary to fully evaluate your request for a business licence. Completion of this form does not guarantee approval of a business licence, nor should business be commenced prior to a licence being issued.

Application Type: (Pick all that are applicable:)						
New Licence Non-Resident Mobile Business	Home Based Business Change of Owner or Address					
BUSINESS OWNER INFORMATION:	PROPERTY OWNER INFORMATION:					
Business Name:	Name of Owner (s):					
Name of Owners:	Mailing Address:					
Street Address:						
Mailing Address:	Phone:					
Phone: Fax:	Fax:					
Email (optional):	Email (optional):					
Website (optional):	Property Tax Roll #:					
GENERAL INFORMATION To be completed for all Business Licence Applications Description of business to be conducted:						
Previous use of space (if different): Does your business conform to the Zoning Bylaw? Size of premises to be occupied:	Yes No (m2 / f2)					
Does your business have off-street parking?	Yes No (If yes, number of stalls:)					
Is your business a Home-Based Business (HBB)?	Yes No (if yes, read & sign Zoning Bylaw excerpt)					
For HBB, will clients be coming to your home?	Yes No (if yes, inspection required)					
Is your business a Mobile Restaurant or Vendor? Yes No (if yes, permission from property owner required)						
Is your business a Mobile Restaurant, Itinerant Show o	r Entertainment? Yes No (if yes, submit copy of insurance policy)					
AU	THORIZATION					
Local business information is displayed on the District website under "Directory of Services". Please check the following to be shown for your business:						
Business name Phone Number Addres						
I hereby make application for a business licence in accordance with the above-stated information and declare that the statements are true and correct. I agree, if granted a licence, to comply with all relevant bylaws now in force or which may come into force in the District of Stewart						
Signature of Applicant:	Date:					

Your personal information is maintained in accordance with the Freedom of Information & Protection of Privacy Act. If you have any questions regarding the use of your personal information, please call the Director of Corporate Services for the District of Stewart at (250) 636-2251



District of Stewart Business Licence Application – FOR OFFICIAL USE ONLY

VERIFICATIONS

Property Zoning: Use Permitted?	Yes:			
		APPROVALS		
	Approval	Required	Approval I	Received
Building Department	☐ Yes	☐ No	☐ Yes	☐ No
Fire Dept. (theatre, service station)	☐ Yes	☐ No	☐ Yes	□ No
Liquor Licensing & Control Boar (liquor outlet)	rd 🗆 Yes	☐ No	☐ Yes	No
Provincial Health Inspector (restaurant/food)	☐ Yes	□ No	☐ Yes	☐ No
Copy of Owner Consent (mobile vendor/restaurant)	☐ Yes	☐ No	☐ Yes	☐ No
Business Licence #:				
Business Classification:		1700		
Billing Class #:				
Licence Fee:				
Date Payment Received:				
APPROVED:	ce Inspector	Date		Signature