



# LICENCE APPLICATION

<b>Licence Type:</b> <input type="checkbox"/> Food Vehicle <ul style="list-style-type: none"> <li><input type="radio"/> Chip Wagon</li> <li><input type="radio"/> Mobile BBQ Facility</li> <li><input type="radio"/> Refreshment Vehicle</li> <li><input type="radio"/> Refrigerated Bicycle Cart</li> <li><input type="radio"/> Other _____</li> </ul> <input type="checkbox"/> Transient Trader <input type="checkbox"/> Multi-Vendor	<b>Duration of Licence:</b> <input type="checkbox"/> Per-Day Licence (\$250. <sup>00</sup> ) <input type="checkbox"/> Annual Licence (\$300. <sup>00</sup> ) <input type="checkbox"/> Multi-Vendor Licence (\$400. <sup>00</sup> ) <input type="checkbox"/> No Fee (Fee Waived by Council)		
<b>Applicant Name:</b>  	<b>I am applying as:</b> <input type="checkbox"/> An Individual <input type="checkbox"/> A Partnership <input type="checkbox"/> An Association <input type="checkbox"/> Other _____		
<b>Business Name:</b>  			
<b>Business Address:</b>  	<b>City/Town:</b>  	<b>Province:</b>  	<b>Postal Code:</b>  
<b>Mailing Address (if different than above):</b>  			
<b>Business Phone: (       )</b>		<b>Business Fax: (       )</b>	
<b>E-Mail Address:</b>  			
<b>Owners/Officers:</b> If the applicant is a corporation, partnership, limited liability company, association, or any other type of entity, please list all officers, directors, partners or members. If more than two (2), include a full list on a separate sheet.  Name: _____ Address: _____  Name: _____ Address: _____			
<b>Proposed Period of Operation:</b>  			
<b>Location(s) of Operation:</b>  		<b>Days/Hours of Operation:</b>  	

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Type of Operation to be Conducted (type of service, goods, wares, merchandise, etc.):	
Description of vehicle, cart, kiosk, stand, etc. or display device to be used in the operation by the applicant including; size, colour, logo(s), signage, etc. which will be utilized by the applicant:	
Licence Plate Number (if applicable) or registration information of any vehicle being used:	
<p>I certify that:</p> <ul style="list-style-type: none"> <li>- All information, statements and documents contained in the said application are true and accurate;</li> <li>- I agree to observe and comply with all requirements of By-Law 12-2018 which pertain to the Licence for which I have made an application and to operate business in compliance with all respective statues;</li> <li>- I am eighteen (18) years of age, or older;</li> <li>- I have been authorized by the business owner listed in this application, to apply for a Business Licence of their behalf.</li> </ul>	
Applicant Signature:	Date:
<p>Application Attachments (if applicable):</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Site Plan</li> <li><input type="checkbox"/> Authorization for use of property</li> <li><input type="checkbox"/> Approval from Medical Officer of Health</li> <li><input type="checkbox"/> Approval from Fire Chief</li> <li><input type="checkbox"/> Approval from a qualified Propane Fitter</li> </ul>	<p>Submit Applications to:</p> <p style="text-align: center;">Township of North Huron C/O Clerk PO Box 90 274 Josephine Street Wingham ON, N0G 2W0</p>

*To the extent that the foregoing information constitutes personal information as defined in the Municipal Freedom of Information and Protection of Privacy Act, R.S.O 1990, chapter M.56 as amended, the information is subject to provisions of that Act and will be used for the purposes indicated or implied by this form. Questions about the collection of personal information should be directed to the Clerk of the Township of North Huron, location at the address stated above, or by telephone at (519) 357-3550.*