

**DEVELOPMENT SERVICES**

200, 5604 50 Street, Ponoka, AB T4J 1G5
Phone: 403-783-4431 Email: permits@ponoka.ca

Office Use Only

Submission Date: _____

Roll: _____

Customer Identification: _____

Business Licence Application
COMMERCIAL/INDUSTRIAL/MOBILE/HOME-BASED
(Please print and complete ENTIRE form)

BUSINESS INFORMATION

Legal Business Name: _____

Operating Business Name: _____

Business Address: _____

Business Mailing Address: _____

Email: _____ Business Phone: _____

APPLICANT INFORMATION

Name: _____ Phone: _____

Mailing Address: _____

Email: _____

ADDITIONAL INFORMATION

1. Are you a ☐ Resident Business, ☐ Non-Resident Business, or ☐ Regional Resident Business?
2. Are you applying for a Short-Term Business Licence (max. 4 months within calendar year)? Yes _____ No _____
3. Are you a Mobile Business Unit (MBU) or Direct Seller? Yes _____ No _____ Vehicle Identification #: _____
4. Are you a Home-Based Business? Yes _____ No _____ Development Permit #: _____
5. Are you the registered property or MBU owner? Yes _____ No _____ If No, Letter of Authorization is required
6. Are you providing a business description? Yes _____ No _____ If No, Letter of Intent is required

The granting of this Licence shall in no way relieve the owner from complying with the Town of Ponoka Land Use Bylaw, Business Licence Bylaw, any other Town bylaws, or applicable Provincial or Federal Statutes or Regulations.

I certify that the Business will abide by all regulations after receipt of a Business Licence and knowing that failure to comply with all regulations may result in penalties, suspension or revocation of my Licence.

Printed Name of Applicant_____
Signature of Applicant