**MOBILE VENDOR (Miscellaneous)**

**BUSINESS LICENSE APPLICATION**

**Application Type  New  New Ownership**

 ** Name Change  Location Change**

**Type of Ownership  Sole Proprietorship  Non-Profit Society**

 ** Partnership  Co-Operative**

 ** Limited Company No. \_\_\_\_\_\_\_\_\_\_**

 ** Corporation No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Business Operation Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Legal Name of Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **(Owners personal name if unincorporated – Corporate/Limited name if incorporated)**

**Mailing Address**

**Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Website \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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|  colour logo |  **THE CORPORATION OF THE VILLAGE OF SLOCAN**P.O. BOX 50, SLOCAN, B.C. V0G 2C0 TELEPHONE (250) 355-2277 FAX (250) 355-2666 info@villageofslocan.ca |
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**BUSINESS LICENSE APPLICATION**

**MOBILE (MISC) VENDOR CHECKLIST**

*“Miscellaneous Business”* shall mean any business not based in a permanent

building within the Village of Slocan, other than a Mobile Vendor.

**Nature of Business:**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I/We plan to vend:**

**Location Proposed:**

**Hours of Operation:**

**I/We understand that:**

* Business proposal, including design and location, must be approved by Village Council.
* All businesses operating within the Village must adhere to all local, provincial and federal regulations.
* Vendors operating after dark must provide adequate lighting.
* Mobile vending licenses are non-transferrable.
* Garbage and recyclables must not be left on site.
* Vendor site shall not create or cause a fire hazard, electrical interference, or noise disturbance.

**I/We understand that to complete the license approval, the Village Office requires:**

* Completed Business License Application
* Proof of $2 million dollar liability insurance showing the Village as Co-Insured
* Payment of a $25 dollar license fee for each month in operation
* Proof of Interior Health Inspection

**APPLICANT DECLARATION**

Business Licenses are non-transferable and the license fee(s) will be determined by the Village of Slocan Business License Bylaw and Fees and Charges Bylaw, where applicable. The information provided in this application is for the purpose of determining the applicant’s eligibility for a Business License in the Village of Slocan pursuant to Bylaw(s). In completing and signing this form, you have declared that all the information provided herein is correct and consent to the sharing of such information with all applicable Village of Slocan departments and related agencies for the purpose of required inspections and approval of this business license application. The applicant declares that they have read and agree to comply with all stated regulations and bylaws enacted by the Village of Slocan.

Applicant(s) Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ License Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BUSINESS PROPOSAL SUMMARY

PLEASE WRITE A DESCRIPTION OR ATTACH A SUMMARY OF THE BUSINESS PROPOSAL

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