



**CITY OF PORT COLBORNE
BUSINESS LICENCE APPLICATION
BY-LAW NO. 4324/160/02**

Business Name:	License Year:
Business Address & Postal Code:	Bus. Phone:
Owner's Name:	Owner's Phone:
Owner's Address & Postal Code:	

NEW LICENCE: _____

RENEWAL LICENCE: _____

TYPE OF LICENCE REQUIRED		FEE	AMOUNT PAID
	Hawker & Peddler / Chip Stand / Vending Cart	Resident - \$50/Non Resident - \$125	
	Refreshment Vehicle	Manual - \$25/Motorized - \$150	

I, THE APPLICANT AND OWNER OF THE BUSINESS, HEREBY MAKE APPLICATION FOR A HAWKERS AND PEDDLERS LICENCE. I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THE PROVISIONS OF BY-LAW 4324/160/02 OF THE CITY OF PORT COLBORNE AND THAT I WILL ABIDE BY THE PROVISIONS OF THE BY-LAW KNOWING THAT ANY VIOLATION OF THE PROVISIONS OF THE BY-LAW WILL BE PROSECUTED ACCORDING TO LAW.

DATE: _____

SIGNATURE: _____

AGENCY	APPROVAL	DATE	SIGNATURE
Regional Public Health Department			
Fire Department			
By-law Department			
Planning & Development			

LIABILITY INSURANCE SUBMITTED: _____

COUNCIL COPIED DATE: _____