



APPLICATION FOR BUSINESS LICENSE
(for businesses operating within the corporate limits of the Town of Onoway)

Box 540, Onoway, AB T0E 1V0
Phone: 780-967-5338
Fax: 780-967-3226
Email: info@onoway.ca
www.onoway.ca

Businesses in Onoway are required to have a valid Business License. Completion of this form does not guarantee approval of a Business License.

Business/Operating Name

Owner/Licensee Name & Address

Name _____

Address _____

Operating Address of Business

Owner Phone _____

Mailing Address (if different from operating address)

Business Directory:
Free Listing in Town of Onoway Business Directory and/or Town website.
**Information indicated with this symbol will be included in the business directory and/or on website.*

Emergency Contacts (Name & Phone Number)

Primary _____

Secondary _____

Would you like your business information advertised in the Town directory and/or Town website? Yes/No

Business Information (shared with emergency services)

*Contact Name _____

*Business Phone _____

Cellular _____

*Fax _____

*Email _____

*Website _____

ANNUAL LICENSE FEES
\$50.00

Fully describe the operation of the business.
What is the proposed trading area?
Outline your hours and days of operation.
Please specify any type of flammable good that will be required for your business and how you intend to store them.

Business owners shall be responsible or carrying out the provisions of the Albert Fire Code. If your Business License fee is exempt in accordance with a Statute of the Province of Alberta, Parliament of Canada or a registered association, you are required to provide proof.

If hazardous materials and/or chemicals are used/stored at business locations, please list:
Other Comments?

This area if for office use only

Tax Roll Number _____ Licence Fee \$ _____ Paid _____

Home based ____ Home Occupation: ____ Commercial/Industrial ____ Exempt ____ *(please check one)*

If exempt, please provide proof – Yes/No

Development Permit - Yes/No Building Permit – Yes/No

Application Date: _____ Issue Date: _____ Renewal Date: _____ Expiry Date: _____

Refusal Date: _____ Refusal Reason: _____

Applicant Printed Name Applicant Signature Date

This personal information is being collected by the Town of Onoway under the authority of Business Licensing Bylaw 749-18 and will be used to administer the Town of Onoway Business Licensing program. It will be treated in accordance with the privacy protection provisions of Part 2 of the Freedom of information and Protection of Privacy Act. If you have any questions about the collection, contact the FOIP Coordinator at 780-967-5338. NOTE: if no Act specifically authorizes the collection of this personal information, then use Section 33 © of the Freedom of Information and Protection of Privacy Act, R.S.A. 2000.