



TOWN OF NIPAWIN
COMMERCIAL BUSINESS LICENSE AND RENEWAL FORM

Date of Application _____ Signature of Applicant _____

I hereby certify that all the statements within this application are true, and I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath, and by virtue of the Canada Evidence Act.

If I am approved for a business license, I agree to conduct this business according to the regulations contained in the Town of Nipawin Licensing Bylaw 961/14 and Zoning Bylaw 763/2000.

Return completed application to: Town of Nipawin
210 2nd Ave E
Box 2134
Nipawin, SK. S0E 1E0
Fax: 306-862-3076

NOTE: Approval generally takes 7 to 10 business days though the process may take longer if other requirements are to be fulfilled before a license can be issued.

Application Type (please check all that apply)
New Business []
Renewal []
Change of location []
Change of ownership []
Change of business name []
Do you own the building/location? Yes [] No []
Previous location _____
Previous name _____

For more information please contact us at: 306-862-0010

Please complete all questions on this application form. Failure to do so may result in delays in processing the application.

Business Name: _____
Operating As: _____
Nature of Business: _____
Business Location: Street Address: _____
Mailing Address: _____ Postal Code: _____
Business Telephone: _____ Fax: _____ Email: _____
Contact person _____ Home Telephone: _____ Website: _____
Owners/Operators:
Will you be the sole owner and operator of this operation? Yes ___ No ___ (Provide name & address of partners)

Business Description; Primary Function; _____
What services and/or goods will be provided or produced? _____
Gross leasable floor area: Definition: the amount of space within a building(s) used by the business operation (such as offices, retail, storage etc.)
At Grade Level [] square feet or [] square meters
Basement _____
Upper Levels _____
Total Number of Employees (including self): Full-time _____ Part-time _____ Casual/Seasonal _____
Seating capacity (for restaurants and bars) _____ persons
Special Equipment
Will any special equipment be required to undertake the operation? _____

PST # SK Vendor's License # (SK Finance) _____

Or Entity # (ISC) _____

Alterations/Renovations:

Have you made any alterations/renovations?

If yes, please indicate any site, plumbing, and building changes and when work was completed.

NOTE: For a **change of use, addition or alteration** to an existing building, it is recommended that you consult with the Economic, Business and Planning Department regarding **building permit or fire inspection** requirements. (306) 862-0010

You may be required to apply for additional permits or site inspections with the Economic Development, Business and Planning Department before your application is approved.

- The Business Licensing Bylaw No. 961/14 requires all businesses to obtain a Business License before beginning any operation
- Every license will be valid until the end of each calendar year (December 31)
- Changes to the information provided require that the Economic Development, Business and Planning Department be notified and the license be updated.
- A change in location requires re-application.
- A business in more than one location requires a licence for each location.
- The Town of Nipawin Business License must be prominently displayed at the place of business

Initial: _____

I give permission to list this business in the Town of Nipawin Business Directories. Yes No

I agree that if my business is located in the downtown that my business contact information can be shared with the Nipawin Business Improvement District. Yes No

Plan: Please provide a floor plan or sketch of your space, indicating area you occupy or if you occupy the entire building (use additional paper as needed and attach):

OFFICE USE ONLY:

ZONING / DISTRICT _____ **LICENSE FEE \$** _____ **File #** _____

APPROVED _____ **DENIED** _____

COMMENTS: _____

REVIEWED BY: _____ Website Letter