

BUSINESS LICENSE APPLICATION

per Bylaw #889

Box 430 • 302 2nd Ave. West • Hanna, AB • T0J 1P0 P (403) 854-4433 • F: (403) 854-2772 • admin@hanna.ca

Section 1: Business Information

Information supplied in this section is required for our records and will be made available to the public through the Town of Hanna's online Business Directory. If you **do not wish** to have your business information posted (specifically Operating Name, Location, Mailing Address, Phone, Fax, Email and Website), please read the statement below and check the box.

| Legal Business Name: | | | | | | |
|--|---------------------|--|--|--|--|--|
| Operating Name: | | | | | | |
| Type of Business: | | | | | | |
| Business Location: | | | | | | |
| Mailing Address (if different than above): | | | | | | |
| City/Prov: | Postal Co | ode: | | | | |
| Business Phone: | Business | Fax: | | | | |
| Website: | _ Email: | Email: | | | | |
| Description of primary product or service: (This information will be used to categorize your business properly on the Town's website. Please be descriptive. You can email an image or logo if you would like one to be used.) | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| ☐ I do <u>NOT</u> wish to have my business inform | ation posted on the | Town of Hanna's online Business Directory. | | | | |
| Section 2: Contact Information | | | | | | |
| Name of Local Contact:: | | | | | | |
| Position: | Email: | | | | | |
| Phone: (business) | (home) | (cell) | | | | |
| Name of Applicant (if different from above): | | | | | | |
| Position: | Email: | | | | | |
| Phone: (business) | (home) | (cell) | | | | |

| Section 3: Application Typ | oe | | | |
|--|---|--|--|---|
| | ☐ New Application | Γ | ☐ Change o | f Ownership |
| Classification (see fees below): | | | | |
| □ Commercial | | □ Annua | l or | ☐ Quarter |
| ☐ Residential | | ☐ Annua | l or | ☐ Quarter |
| ☐ Non-Assessed (within | 1 60 km of Hanna) | □ Annua | l or | □ Quarter |
| ☐ Non-Assessed (outside | de 60 km of Hanna) | □ Annua | l or | ☐ Quarter or ☐ Week or ☐ Day |
| ☐ Special Event | | \$100/eve | nt | |
| Starting Date: | 20_ | | | urchased July-Nov are charged 50% |
| Business classifications & feet Commercial 1: | es as per policy #00-6 \$50/annum or \$25.00 | | | amount. Licenses purchased in Dec. e for the following calendar year. |
| Residential ² : Non Assessed & Direct Seller: Notes: | \$100.00/annum or \$5 Residing within 60 km Residing outside 60 km | of Hanna) | \$100 a \$400 | /annum or \$50/quarter /annum, \$200/quarter /week or \$50/day |
| Commercial: Residential Non-Assessed & Direct | | pation devel | opment perr | d location. nit is required to be submitted as well. cense application. |
| obtaining necessary permits red | ղuired through Town B։ | - | rovincial, Fe | deral and Statutory Regulations. |
| Signature of Applicant | | | Jaie | |
| may be used to notify the Applicant violation under the Business License will be made available on the Town of | in regard to: eligibility to Bylaw or in case of an e of Hanna website and ma | o obtain/rener emergency. ` ay be disclose | w a Business You should be ed to members | dom of Information and Privacy Act (FOIP) a License, revocation of a Business License e aware that Business Identification informal s of the public in accordance with FOIP. If the Town of Hanna at (403) 854-4433. |
| | OF | FICE USE C | NLY | |
| *Change of Use OR Home Occup Application DENIED for the follow | pation Development Pe ving reason(s): | ermit # D | | |
| OR Application APPROVED on: | 20Issu | ied on: | 20 |) |
| BL Account Number: F | Receipt Number: | | or 🗆 Red | eipt Attached |
| Authorized Signature: | | | | |

Form BLA Revised: Feb 2020 W:\26 Bylaw Enforcement\522 Business License\Forms\Form BLA 1.14.22.docx Page 2 of 2

License Inspector