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**APPLICATION FOR BUSINESS LICENSE**

|  |  |
| --- | --- |
| Name of Individual |  |
| Name of Corporation/Business |  |
| Address for Service |  |
| Phone Number: | Email Address: |

**TYPE OF BUSINESS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Food Vehicle 🞎 | Food Stand 🞎 | Donation Box 🞎 | Temporary Vendor 🞎 | Door to Door Sales 🞎 |
| Products/Goods Being Sold: |
| Items Collected & Distributed Details: |
| Location: |

**DOCUMENTATION REQUIRED**

Required by All:

🞎 Licensing Fee

🞎 Insurance $2 Million naming Wellington North co-insured

*Please ensure you have the following documentation for your type of business:*

|  |  |
| --- | --- |
| **FOOD VEHICLE** | **DONATION BOXES**  |
| 🞎 Gas/Propane Inspection Report | 🞎 Government Issued Identification |
| 🞎 Driver’s License | 🞎 CRA Registered Charity Number |
| 🞎 Health Unit Approval | 🞎 Statement as to How Charity Benefits |
| 🞎 Driver Record Search | 🞎 Articles of Incorporation |
| 🞎 Commercial Vehicle  Operator Registration | 🞎 Written Consent of Property Owner |
| 🞎 Inspection Report- Fire Chief | 🞎 Site Plan |
| 🞎 Proof of Zoning |  |
| 🞎 Written Consent of Property Owner |  |
| **FOOD STAND**  | **DOOR TO DOOR SALES**  |
| 🞎 Proof of Zoning  | 🞎 Written Permission from Owner/ Occupant to enter onto Private Property |
| 🞎 Licensing Fee |
| 🞎 Sketch/Site Plan  | 🞎 Articles of Incorporation |
| 🞎 Gas/Propane Inspection Report | 🞎 Company Issued Photo ID per Salesperson |
| 🞎 Inspection Report – Fire Chief  |
|  🞎 Written consent of the owner | 🞎 Vulnerable Sector Check per Salesperson |
| 🞎 Health Unit Approval |  |

Signature of Applicant Date