



Corporation of the Village of Salmo

P.O. Box 1000
Salmo, British Columbia V0G 1Z0
Phone (250) 357-9433

www.salmo.ca
e-mail – info@salmo.ca
Fax: (250) 357-9633

Schedule "B" Business Licence Application Form Per Bylaw #645

Business Name: _____

Business Location: _____

Basic description of business:

Liquor Licence? Yes No

If yes, type? Food Primary Liquor Primary With Endorsement

No. Seats (Restaurants & liquor establishments): _____

No. Merchandise Machines: _____

Is this business: New Existing

Describe any Structural Changes to Business Premises: Proposed Completed None

Sharing Premises With: _____

Floor Area (In sq. ft.): Retail: _____ Wholesale: _____

Office: _____ Warehouse: _____

Outside: _____

Do you have sufficient parking: Yes No

Salmo Representative for Business: _____

Title: _____

Tel.: _____

Emergency Contact Name: _____

Tel.: _____

After Hours Number: _____

OWNERSHIP INFORMATION

(All owners to complete this section. Additional owners can be submitted on separate paper.)

Name: _____

Title/Position: _____

Owner's Home

Address: _____

City: _____ Province: _____ Postal Code: _____

Tel.: _____ Cell: _____

Email: _____

Identification Provided: _____ (DL/SIN/Birth Cert)

I hereby make application for a business licence in accordance with the above-stated information and declare that the statements are true and correct. I agree, if granted a licence, to comply with all relevant Bylaws now in force or which may come into force in the Village of Salmo.

Name: _____

Title: _____

Signature: _____

Date: _____

Note: This application will not be processed without the application fee. In order to receive the fee amount, please contact the Village of Salmo office at 250-357-9433 / info@salmo.ca. Business Licences are public records and are available for inspection on request at the Village office. The Village also makes business licence information available in various additional publications. If you do not wish your business information to be made available in any additional publications, a request in writing to decline publication must be received by the Licence Inspector. All information gathered for business licencing purposes is managed in accordance with the Freedom of Information and Protection of Privacy Act.

Office Use Only:

GN Code Type: _____ Sub Type: _____ Fee: _____

Received by: _____

Date: _____

Approved by Licence Inspector: _____

Department Checks:

Building Inspector: _____

Peace Officer: _____

Completed forms can be faxed to (250) 357-9633 or emailed to info@salmo.ca.