

# CITY OF BRANDON

410 9<sup>TH</sup> Street, Brandon, Manitoba, R7A 6A2

## GENERAL BUSINESS LICENSE APPLICATION

NAME: \_\_\_\_\_

ADDRESS/CITY: \_\_\_\_\_

EMAIL: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_ HOME PHONE NO.: \_\_\_\_\_

BUSINESS NAME (if any): \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

BUSINESS PHONE NO.: \_\_\_\_\_

NUMBER OF EMPLOYEES (full & part time): \_\_\_\_\_

TYPE OR NATURE OF BUSINESS: \_\_\_\_\_

OWNER OF BUSINESS (if different than above): \_\_\_\_\_

**NOTE:** A business license will authorize you to conduct business in the City of Brandon only and Provincial or Federal Licenses may also be required. Separate regulations may apply to the location of business within the City of Brandon.

\_\_\_\_\_  
Signature of Application

\_\_\_\_\_  
Date of Application

(License Department Use Only)

FEE DUE: \_\_\_\_\_

LICENSE NO./RECEIPT NO.: \_\_\_\_\_

### RECOMMENDED

	YES	NO	DATE
BRANDON POLICE SERVICES:	G	G	_____
FIRE INSPECTOR:	G	G	_____
BLDG. INSPECTION & SAFETY B.A.P.D.:	G	G	_____
LICENSE INSPECTOR:	G	G	_____