



Box 100 | 7400 Prospect Street  
 Pemberton BC V0N 2L0  
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 businesslicence@pemberton.ca  
 Website: [www.pemberton.ca](http://www.pemberton.ca)

## COMMERCIAL BUSINESS LICENCE APPLICATION

<b>Licence Number:</b>		<b>Date:</b>	
Business Name:		Open Date:	
Owner Name(s):		Phone:	
		Phone:	
Manager Name:		Phone :	
Email:			
Website:			
Business Location:		Mailing Address:	
Commercial Floor Area (m <sup>2</sup> )			
Business Activities – describe what you do:			
<b>Is this an Auxiliary Business to another Business?</b>		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Number of employees (including owner(s)):	Full time:	Part time:	Seasonal:
<b>Invoice Annually*?</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<p>I/We hereby make application for a licence in accordance with the particulars stated in this application, declare the above statements are true and will comply with each and every obligation contained in all laws and Bylaws now in force or which may hereafter come into force in the Village of Pemberton.</p> <p>The Village reserves the right to suspend or cancel a business licence where the applicant has knowingly provided false information to the Village with regard to the operation, ownership or any other aspect of the business in question.</p> <p>It is understood that the Business Licence fee is payable to the Village at the time of application. Fees for approved Business Licence applications are non-refundable.</p>			
<i>Name of Applicant</i>	<i>Signature of Applicant</i>	<i>Date</i>	
Personal information you provide on this form is collected pursuant to section 26 of the <i>Freedom of Information and Protection of Privacy Act</i> and will only be used for the purpose of processing the business licence application. Your personal information will not be released except in accordance with the <i>Freedom of Information and Protection of Privacy Act</i> . Questions about the collection of your personal information may be referred to Corporate & Legislative Services ( <a href="mailto:corporate@pemberton.ca">corporate@pemberton.ca</a> or 604-894-6135)			

## APPLICATION REQUIREMENTS

**The Business Licence Fee is due upon submission of a completed Business Licence application. Fees are non-refundable once a Business Licence has been issued.**

**\*Please note that Business Licence must be renewed annually (see fee schedule below). If you are no longer conducting business within the Village boundaries, please notify the Village so that the Business can be noted as closed.**

### Application Checklist:

<input type="checkbox"/> LICENCE FEE	<input type="checkbox"/> VCH PERMIT
<input type="checkbox"/> SIGN PERMIT	<input type="checkbox"/> PARKING PLAN
<input type="checkbox"/> CONFIRMATION OF OWNERSHIP OR LEASE AGREEMENT	<input type="checkbox"/> OTHER

### Fee Schedule

Annual Licence Fee	<b>\$150.00</b>
Annual Licence fee, application received after October 1st	<b>\$75.00</b>
Auxiliary Business Licence	<b>\$50.00</b>
Administrative Fee (for changes made to business licence account such as change of name or change of address)	<b>\$25.00</b>
Late Payment Fee (for licence renewals if fee received after January 31 <sup>st</sup> )	<b>25%</b>
Reinspection Fees as per Fire Prevention Bylaw No. 744, 2013, and Building Bylaw 867, 2019	

#### VCH PERMITTING IS REQUIRED FOR:

- Food stores, food processors, temporary food events, restaurants, food carts;
- Pools and Hot Tubs, spas, Flotation Tanks (sensory-deprivation)
- Hair cutting, esthetics – including nail treatments, makeup, waxing, permanent makeup, foot baths etc., body contouring, hair removal, tattooing, piercing;
- Community Care Facilities including childcare;
- Animal slaughter for public sale (abattoirs)

For further information on health approvals, please contact VCH directly.

## Business Service Listing

Thank you for your Business Licence Application. One of the benefits of your business licence is a listing in the Village's public online Business Directory.

Take your time when completing this form as the information below will appear on online Business Directory **exactly** as provided.

Business Name:			
Address:		Phone:	
		Mobile:	
Website:		Email:	

Business Category (Select One Only)		
<input type="checkbox"/> Accommodations	<input type="checkbox"/> Accounting & Bookkeeping	<input type="checkbox"/> Adventure, Recreation & Tours
<input type="checkbox"/> Artist & Dance Studios	<input type="checkbox"/> Arts, Culture & Heritage	<input type="checkbox"/> Automotive & Towing
<input type="checkbox"/> Bed & Breakfast	<input type="checkbox"/> Building & Construction	<input type="checkbox"/> Childcare
<input type="checkbox"/> Chiropractic, Massage and Physiotherapy	<input type="checkbox"/> Cleaning Services	<input type="checkbox"/> Communications, Marketing & Event Management
<input type="checkbox"/> Community Group	<input type="checkbox"/> Computers & I.T.	<input type="checkbox"/> Consulting
<input type="checkbox"/> Contractor	<input type="checkbox"/> Cultural Map	<input type="checkbox"/> Financial Institution
<input type="checkbox"/> Garden & Landscape Services	<input type="checkbox"/> Gas Station	<input type="checkbox"/> Grocery Store
<input type="checkbox"/> Health & Fitness	<input type="checkbox"/> Medical & Dental	<input type="checkbox"/> Merchants & Retail
<input type="checkbox"/> Real Estate & Property Management	<input type="checkbox"/> Restaurants & Dining	<input type="checkbox"/> Services
<input type="checkbox"/> Storage	<input type="checkbox"/> Tourism	

**BRIEF DESCRIPTION:**

By signing below, I acknowledge that the information provided on this form will be published on a public website:

<i>Name of Applicant</i>	<i>Signature of Applicant</i>	_____, 20____ <i>Date</i>
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**For office use only**

Date Entered on Website: _____	By: _____
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**For Office Use Only**

Name of Business: \_\_\_\_\_ Licence Type: \_\_\_\_\_

Application Fee Received: \_\_\_\_\_

*\*Attach copy of Receipt*

*Received By*

*Received On*

Department	<input checked="" type="checkbox"/> Report or N/A	SIGNATURE	DATE
Planning	<input type="checkbox"/>		
Building Inspector	<input type="checkbox"/>		
Fire Inspector	<input type="checkbox"/>		
Public Works Dept	<input type="checkbox"/>		
VCH	<input type="checkbox"/>		
Utilities Check	<input type="checkbox"/>		

NOTES

Auxiliary to another business: <input type="checkbox"/> YES <input type="checkbox"/> NO

Authorized for Issuance:

\_\_\_\_\_  
Manager, Corporate & Legislative Services, Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR FINANCE USE ONLY**

Business License Issued

*Issued by*

*Issued on*

Fee Refunded (if applicable)

*Refunded*

*Refunded on*