



Box 100 | 7400 Prospect Street  
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## BUSINESS LICENCE CANCELLATION REQUEST

Effective Date: \_\_\_\_\_ **FILE #:** \_\_\_\_\_

**CURRENT INFORMATION:**

Legal Business Name: \_\_\_\_\_

*(Please Print)*

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Civic Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**DATE BUSINESS CLOSED:**

**Reason for Business Licence Cancellation** (ie: moved/closed/no longer doing business in Pemberton):

\_\_\_\_\_  
 \_\_\_\_\_

*Business Owners Name - Print*

*Business Owners Signature*

*Date*

Personal information you provide on this form is collected pursuant to section 26 of the *Freedom of Information and Protection of Privacy Act* and will only be used for the purpose of updating the business licence information. Your personal information will not be released except in accordance with the *Freedom of Information and Protection of Privacy Act*. Questions about the collection of your personal information may be referred to Sheena Fraser, Manager of Corporate & Legislative Services ([sfraser@pemberton.ca](mailto:sfraser@pemberton.ca) or 604-894-6135).

**For Office Use Only**

Licensing Inspector

Approval: \_\_\_\_\_

*Print Name*

*Date*

*Initials*

Accounting:

*Print Name*

*Date Updated*

*Initials*

Communications

Website Listing Removed: \_\_\_\_\_

*Print Name*

*Date Removed*

*Initials*