



**SCHEDULE C:
BUSINESS LICENCE APPLICATION**

BUSINESS LICENSE APPLICATION

Application Date: _____

A. APPLICANT'S INFORMATION:

<u>APPLICANT'S NAME:</u>	
<u>MAILING ADDRESS:</u>	
<u>EMAIL:</u>	<u>PHONE:</u>

B. BUSINESS INFORMATION:

<u>BUSINESS NAME:</u>	<u>INCORPORATION NO.:</u>
<u>BUSINESS CIVIC ADDRESS/LOCATION:</u>	
<u>CONTACT PERSON:</u>	<u>PHONE:</u>
<u>DESCRIPTION / NATURE OF BUSINESS:</u>	
<u>BUSINESS WEBSITE:</u>	<u>CONTACT EMAIL:</u>

C. BUSINESS MAILING ADDRESS AND CONTACT INFORMATION:

<u>BUSINESS MAILING ADDRESS:</u>	
<u>PHONE NUMBERS:</u>	<u>FAX:</u>

D. OWNER'S MAILING ADDRESS AND INFORMATION (IF DIFFERENT FROM APPLICANT):

<u>OWNER'S NAME:</u>

MAILING ADDRESS:	
EMAIL:	PHONE NUMBER:

E. OTHER KEY PEOPLE:

NAME:	
MAILING ADDRESS:	
EMAIL:	PHONE NUMBER:
AFFILIATION WITH BUSINESS:	
NAME:	
MAILING ADDRESS:	
EMAIL:	PHONE NUMBER:
AFFILIATION WITH BUSINESS:	

F. PREMISES (IF APPLICABLE)

If the proposed Business will not be carried out from a Premises, skip and proceed to G.

BUSINESS CIVIC ADDRESS/LOCATION (IF DIFFERENT FROM ABOVE):
LEGAL DESCRIPTION OF PREMISES:
SQUARE FOOTAGE INFORMATION:
ACCESSIBILITY INFORMATION:

PROPOSED PARKING AREA:
REQUIRED NUMBER OF PARKING SPACES:

1. Is there a floor plan for the Premises? Yes ☐ No ☐
If YES, please attach a copy of the floor plan
2. Has a Fire Inspection been completed? Yes ☐ No ☐
If YES, please attach a copy of the Inspection Report.
3. Is the Premises currently under construction or renovation? Yes ☐ No ☐
4. Do you have insurance coverage for the Premises? Yes ☐ No ☐
If YES, please attach proof of insurance coverage

G. OTHER INFORMATION:

5. Have you previously had a business license from the Lac La Ronge Indian Band? Yes ☐ No ☐
If YES, please provide the license number: _____
6. Are you presently registered with the federal government or a self-regulating professional body with respect to the conduct of your business? Yes ☐ No ☐
If YES, please provide proof and give details below:

7. Are you bonded? Yes ☐ No ☐
If YES, please provide proof and give details below:

8. Have you, within the past three years, been convicted of an offense under the *Criminal Code*, RSC 1985, c C-46, as amended from time to time, for which you have not been pardoned? Yes ☐ No ☐

9. Is the business incorporated federally or provincially?

Yes ☐ No ☐

If YES, please provide required details:

10. Is the business administered by a partnership?

Yes ☐ No ☐

If YES, please provide required details:

11. Food/Liquor Services Only: Licence Required?

Yes ☐ No ☐

If YES, please provide the license number: _____

If YES, please also attach a copy of the Health Inspection Report.

H. ADDITIONAL REQUIRED ITEMS AND DOCUMENTATION:

You must submit the following in support of your Business Licence Application:

- Applicable Business Licence fee, as prescribed in Schedule A of the *Lac La Ronge Indian Business Regulation Law*.

Where applicable, you must also remit the following in support of your Business Licence Application:

- Further detailed information on the Premises in which the Business will be carried out in, including:
 - information on permitted uses of the Premises (including zoning, development, subdivision, strata and land use requirements);
 - proof of compliance with any other legal requirements;
 - if necessary and requested by the Lands Committee, a letter of authorization from the holder of an allocation or Interest in the Land for which the Business will be operated from, if the applicant is not the allocation or Interest holder;
 - if necessary, a letter of assurance from an engineer or architect indicating that the Premises, if it is a building or structure, can be used safely for its intended use; and
 - if necessary, proof of insurance coverage for the Premises;
- Proof of personal, professional, or commercial liability insurance coverage;
- A copy of all necessary certificates from federal, provincial or municipal government authorities, including, for example:
 - a health certificate from the appropriate health inspector;
 - if the applicant belongs to a regulated profession, a copy of the applicant's professional licence; and

- o proof of other licencing for the specific Business activities, including, for example, for the sale or distribution of liquor, proof of licensing under the *Alcohol and Gaming Regulation Act, 1997*, or for a daycare, proof of licensing under the *Child Care Act, 2014*.

I. ACKNOWLEDGEMENTS:

By signing and submitting this application, I understand and agree that:

1. The Business Licence does not provide authorizations for land use or other matters, and other permits or authorizations may be required; and
2. I am authorized to act as agent of the Business named in this application, and release and indemnify Lac La Ronge Indian Band against any claims in relation to the Business or Premises for which the Business Licence is being sought.

NAME:	SIGNATURE:
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LANDS & RESOURCES DEPARTMENT USE ONLY:

DATE FEE PAID _____ AMOUNT PAID \$ _____ METHOD OF PAYMENT: _____	RECEIPT #:
Fee waived <input type="checkbox"/> Fee Halved <input type="checkbox"/>	Business Licence number assigned to this application:
Business Type:	Licence number if applicant licenced under a regulated profession:
Lease/sub-lease Number:	Zoning: Use is permitted:
Copy of lease or sub-lease provided:	Accessibility plan or report provided:
APPROVALS:	
Building Inspector:	Fire Department:
Health Department:	Lands & Resources Department:
Liquor Control Branch:	Environmental Health Inspection:
Date of approval:	Reviewed By:
Signature:	