



**HAMLET OF TUKTOYAKTUK
BY-LAW NO. 383
Schedule "A"**

APPLICATION FOR BUSINESS LICENCE

Date: _____

COMPANY INFORMATION (Please Print)

COMPANY NAME: _____

COMPANY STREET ADDRESS: _____

COMPANY MAILING ADDRESS: _____

POSTAL CODE: _____ PHONE # (BUSINESS): _____

FACSIMILE NO: _____

TYPE OF BUSINESS: _____

TRADE QUALIFICATIONS: _____

PROJECT CONTRACTED FOR: _____

WORKERS' COMPENSATION BOARD FORM NUMBER: _____

(if applicable)

PERSONAL INFORMATION

OWNER(S) NAME(S): _____

RESIDENTIAL ADDRESS: _____

MANAGER: _____

POSTAL CODE: _____ PHONE # (RESIDENTIAL): _____

WSSC COPY OF COMPLIANCE FORM MUST BE ATTACHED

Signature of Applicant

FOR OFFICE USE ONLY:

Business Licence No. _____

Renewal Date: _____

Annual Fee: _____