



DISTRICT OF 100 Mile House

#1-385 Birch Avenue, PO Box 340 100
Mile House, BC, V0K 2E0
250-395-2434
district@100milehouse.com

New Licence

Transfer
Location

Transfer
Ownership

Non-Profit

Name Change

Businesses operating in the District of 100 Mile House are required to have a valid business licence. The information requested in this application is necessary to fully evaluate your request for a business licence. **CHECK YOUR ZONING BEFORE COMPLETING APPLICATION.** Completion of this form does not guarantee approval of a business licence. **Business should not be commenced prior to a licence being issued. Business Licence Applications will be processed within 10 business days.**

- 1.) Licence fees apply to a calendar year January 1st to December 31st.
- 2.) Where applicable licence fees are pro-rated to \$80.00 after July 31st for new bus. only in the 1st year of an application.
- 3.) If the licence is approved, licence fees are not refundable.

Business Information:

Business Name: _____

Location (CIVIC): _____

Mailing Address: _____

Phone: _____ Fax: _____ E-Mail: _____

After Hours

Contact Name(s): _____ Phone # _____

Owner / Corporate Information:

☐ Name: _____

Mailing address (If different from above): _____

Phone: _____ Fax: _____ E-Mail: _____

☐ Name: _____

Mailing address (If different from above): _____

Phone: _____ Fax: _____ E-Mail: _____

Type/Description of Business: _____

Is the above Business Location currently under construction and/or renovation? Yes No

Is the above Business Location to be renovated prior to opening the business? Yes No

Has a Sign Permit been obtained for the new location? Yes No

Has the above Business Location been vacant for the previous six months? Yes No

Is the above Business required to obtain a permit from Interior Health? Yes No

Is this for Off-Premises Sales Yes No

HAVE YOU CHECKED YOUR ZONING? Yes No

BUSINESS LICENCE APPLICATION CON'T

Restaurants:
Number of Seats: _____

Salon/Barber Shops:
Number of Chairs: _____

Accommodation Services:
Number of Rental Units: _____

Opening Date: _____

Licence Fee: \$ _____

I/We consent to receiving business related emails from the District of 100 Mile House. YES NO

I/We _____ hereby apply for a District of 100 Mile House Business License. I/We understand that the Business License cannot be sold. I/We further agree that should the license applied for herein be granted, that I/we will abide by all the bylaws now in force or which hereafter come into force in the District of 100 Mile House.

I cannot commence business until such time as a Business Licence has been approved and issued.

Signature of Applicant

Name (Printed)

Date

FOR OFFICE USE ONLY

Zoning: _____ Permitted Use Description: _____

Folio#: _____ (Contractor) Within Municipal Boundaries Home Occupation

New UB Account _____ Landlord _____

APPROVALS REQUIRED

	Fire Department	Signature	
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Previous Occupancy Class : _____ Current Occupancy Class : _____

Comments: _____

	Building Inspector	Signature	
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Building Permit # _____

Comments: _____

**Approval Not Required
as per District Policy**

**Planner
Fire Dept.
Building Insp.**

Reasons: (a)
(b)
(c)
(d)

**no change in occupancy use
not vacant for more than 6 months
no Building permit applied for
other: _____**

(X) _____
Business Licence Inspector

APPROVAL DATE: _____

CUSTOMER: _____

CLIENT: _____

OWNER: _____