

**City of Portage la Prairie
APPLICATION FOR BUSINESS LICENSE**

The undersigned hereby applies for a license as follows:

Name:	Name of business:
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Home Address:

Business Address:	Do you wish your business Name to be Listed on Our virtual City Hall: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Continuous business

Seasonal Business **Start Date** _____ **End Date** _____

Phone number:	Type of Business:(describe in detail)
Fax Number:	
E-Mail address:	

Type of Product:	Mode of Transportation:
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Affiliation (if any): (name of company)

If Salesman- Provincial License Number:

If Mobile Food Vending Unit-

a) Health Inspector's Certificate _____

b) Proof of Insurance _____

Place of Residence last 3 Months:

Other Information:

Date:	Signature:
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FOR OFFICE USE ONLY:

License Fee:	Receipt#
Signature:	Customer ID #
	License#

Property Taxation Class if in City: