



Box 370  
Carstairs, AB T0M 0N0  
Phone: 403-337-3341  
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www.carstairs.ca

## BUSINESS LICENSE APPLICATION

### 1. Company Information

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

URL: \_\_\_\_\_ Email: \_\_\_\_\_

### 2. Business Description

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

### 3. Number of Employees:

a) Permanent Full Time (32 hours per week or more) \_\_\_\_\_

b) Permanent Part Time (less than 32 hours per week) \_\_\_\_\_

c) Seasonal (less than 6 months continuous employment) \_\_\_\_\_

d) Casual (working on an on-call basis) \_\_\_\_\_

e) Do you export? Yes ☐ No ☐ - If yes, where do you export? \_\_\_\_\_

What do you import? \_\_\_\_\_

f) Do you import? Yes ☐ No ☐ - If yes, where do you import from? \_\_\_\_\_

What do you import? \_\_\_\_\_

g) Are you planning on expanding your business? Yes ☐ No ☐

### 4. Disclosure of Business Information

The information above may be included on the Town of Carstairs online business directory and on a publicly accessible database for economic development purposes. Does the Applicant consent to such disclosure?

Yes ☐ \_\_\_\_\_  
Signature of Applicant

No ☐ \_\_\_\_\_  
Signature of Applicant

## 5. Declaration of Applicant

The Applicant certifies that the information given is true and correct. The applicant further agrees to abide by all and any By-laws, Rules and Regulations that re now or hereafter may be in forced with respect t the same trade, business or calling hereby licensed.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Application

The personal information requested on this form is being collected in order to process your application and is governed by the Freedom of information and Protection of Privacy Act (FOIP). If you have any questions with respect to the collection or releases of this information, please contact the CAO at the Town of Office.

### For Office Use Only

Resident (\$100.00) ☐

Receipt # \_\_\_\_\_ Date: \_\_\_\_\_

Non-Resident (\$125.00) ☐

License # \_\_\_\_\_ Paid: \_\_\_\_\_

### Town of Carstairs Website Business Directory

Payment of your Business License Fee includes one free listing in the category of your choice in the Town of Carstairs Website Business Directory, only if you checked off "yes" in response to Question #4 on the first page.

Please check off the category that best describes your business:

- |   |   |
|---|---|
| <input type="checkbox"/> Accommodations             | <input type="checkbox"/> Liquor                   |
| <input type="checkbox"/> Accounting/ Bookkeeping    | <input type="checkbox"/> Medical/Vet Services     |
| <input type="checkbox"/> Agriculture                | <input type="checkbox"/> Personal/Home            |
| <input type="checkbox"/> Animal Grooming/Boarding   | <input type="checkbox"/> Plant Nursery            |
| <input type="checkbox"/> Automotive                 | <input type="checkbox"/> Professional             |
| <input type="checkbox"/> Bakery/Catering            | <input type="checkbox"/> Promotions/Media         |
| <input type="checkbox"/> Building/Construction      | <input type="checkbox"/> Real Estate              |
| <input type="checkbox"/> Carpet/Upholstery Cleaning | <input type="checkbox"/> Recreation/Entertainment |
| <input type="checkbox"/> Childcare                  | <input type="checkbox"/> Recycling                |
| <input type="checkbox"/> Chiropractor/Massage       | <input type="checkbox"/> Rentals/Storage          |
| <input type="checkbox"/> Dining                     | <input type="checkbox"/> Retail                   |
| <input type="checkbox"/> Electrical/Gas/Plumbing    | <input type="checkbox"/> Transportation/Taxi      |
| <input type="checkbox"/> Financial Institutions     | <input type="checkbox"/> Travel                   |
| <input type="checkbox"/> Fuel/Service Station       | <input type="checkbox"/> Trucking                 |
| <input type="checkbox"/> Janitorial                 | <input type="checkbox"/> Utilities                |
| <input type="checkbox"/> Landscaping/Florists       | <input type="checkbox"/> Welding                  |

If you have any questions about your Business listing on the Town of Carstairs Business Directory, please contact Sharon Koop at [sharonk@carstairs.ca](mailto:sharonk@carstairs.ca) or (403) 337-3341

\_\_\_\_\_  
Arlene Andrews Protective Services

\_\_\_\_\_  
Date of Approval