

FORM 1

BUSINESS LICENSE

_____ is hereby authorized to conduct a business,
(NAME OF LICENSEE)

calling, trade or occupation in the following _____ on the
M'Chigeeng First Nation Indian Reserve for the period commencing _____,
20____ and expiring _____, 20_____.

(NAME OF BUSINESS)

(LOCATION OF BUSINESS)

SIGNATURE OF LICENSE ADMINISTRATOR)

SIGNATURE OF LICENSEE)

(DATE)

FORM 2

DATE: _____

BUSINESS LICENSE APPLICATION

1. Applicant's Name: _____
2. Applicant's Date of Birth: _____
3. Applicant's Address: _____
(Residence)
4. Name of Business/Company proposed as licensee: _____

5. Mailing Address: _____
(Partnership/Corporation if different from above)
6. Phone number: residence: _____ office: _____
7. Fax number: _____
8. Email address: _____
9. Name of Business to be licensed: _____
10. Address of Business to be licensed: _____

11. Name of individual in charge at this location: _____
12. Title of individual in charge: _____
13. Type of Business: _____

14. Have you previously had a business license from this First Nation:

Yes _____ No _____

15. 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, applicant must provide proof and give details below)

16. Are you bonded with a bonding agency with respect to the conduct of your business?

Yes _____ No _____ (If yes, applicant must provide proof and give details below).

17. Is the business incorporated? Yes _____ No _____ Federal _____

Provincial _____ (If yes, applicant must provide proof and give details below – registration).

18. Is the business administered by a partnership? Yes _____ No _____

(If yes, applicant must provide proof and give details below – registration).

NOTE: Please read section 8 of this by-law which outlines the conditions whereby your license could be denied, revoked, or suspended.