## THE CORPORATION OF THE VILLAGE OF WARFIELD BUSINESS LICENSE APPLICATION

Name of Applicant in Full			
Address of Applicant			
Name of Business			
Address of Business			
Telephone Number			
Business Class (see schedule 'C	<b>'</b> )		
<ul><li>Primary Business Class</li></ul>			
<ul> <li>Secondary Business Class</li> </ul>	s(es)		
License Duration	From(dat	to December	31,(year)
License fee is \$25 for the pr class conducted on the same	_	s class and \$10 for ea	ach secondary business
I,	ss License Bylaw on provided in t ws applicable to	v and the information pr this application is true ar the operation and cond	ovided in this application, nd correct, and I agree to
(date)		(Signature of Applica	nt)
License approved / rejected:			
(date)		(Signature of License Ins	pector)
Reason(s) for license rejection:			