

# District of Saanich Business Licence Application



**Application Type (check one)**

- New Business to Saanich  
  Change of Address within Saanich  
  Change of Ownership  
  Change of Name  
  Re-Opening of Business

<b>Business Name:</b>	<b>Company Ownership Name (i.e. ABC Ltd.):</b>
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**Owner(s) Personal Name and Address**

First	Last	
Address	City	Postal Code
First	Last	
Address	City	Postal Code

**Business Information**

Number of Owners	Number of Local Employees (not including owners)	CRA Business # (if applicable)		
Detailed Nature of Business				
Business Location (Civic Address)		Mailing Address (If different from Business Location)		
Business Telephone Number(s)	Local Contact Name & Phone No.			
Alternative Name & Cell Phone No.:	Business Email			
New Location Opening Date	Will you receiving clients at your residence <input type="checkbox"/> Yes <input type="checkbox"/> No	Non-Resident <input type="checkbox"/> Yes		
Daily Licence (Trade/Exhibition) # of Days Required _____	Commercial Sq. Ft: _____	Commercial & Intermunicipal Sq. Ft: _____	Home Based Sq. Ft: _____	Home Based & Intermunicipal Sq. Ft: _____
Will anyone be renovating or altering the premises? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Description of proposed changes:				

Department	Approval	Date	Comments	Bylaw Rate(s)
Planning				Category:
Fire				Intermunicipal:
Inspections				Fee:
Health				Inspector:
Police				
Date/Approval/Restrictions:				

**See Over →**

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**Residential Businesses of the District of Saanich must also provide the following information:**

Vehicles	
Number of vehicles used in the business: _____	Make and Model: _____
Gross Vehicle Weight: _____ <input type="checkbox"/> Kilograms <input type="checkbox"/> Pounds	
Number of barber chairs/styling stations: _____	

**Licencing for an Apartment or Hotel**

Manager		
Name (s)		
Address	City	Postal Code
Email	Phone	Cell

Specify number of rental units			
# of studio/bachelor _____	# 1 bdrm _____	# 2 bdrm _____	# 3 bdrm _____

**IMPORTANT NOTICE**

By submitting this business licence application, the listed applicant hereby declares that all the information is correct and that they will comply with the bylaws and regulations of The District of Saanich.

<b>Applicant's Signature</b>	<b>Print Name</b>	<b>Date</b>

This collection of personal information is authorized under the Local Government Act, Community Charter and section 26(c) of the Freedom of Information and Protection of Privacy Act. The information will be used for processing this application. Questions can be directed to the District's Privacy Officer at 770 Vernon Avenue, Victoria BC V8X 2W7 t. 250-475-1775, e. [foi@saanich.ca](mailto:foi@saanich.ca)

THIS SECTION IS FOR OFFICE USE ONLY			
Date Received:		Account No.:	