

**THE MUNICIPAL DISTRICT OF WILLOW CREEK NO. 26**

Hwy 520 West, Claresholm Industrial Area  
Box 550, Claresholm, Alberta T0L 0T0  
Phone: (403) 625-3351 Fax: (403)625-3886  
[www.mdwillowcreek.com](http://www.mdwillowcreek.com)

**Bylaw No. 1603**

**APPLICATION FOR BUSINESS LICENSE**

BUSINESS NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

BUSINESS PHONE NUMBER(S) \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_ CELL NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

BUSINESS LOCATION (legal description OR street address, etc. if different from mailing address):

OWNER/MANAGER NAME: \_\_\_\_\_

MAILING ADDRESS: (if different from above) \_\_\_\_\_

HOME PHONE NUMBER: \_\_\_\_\_ Display in Business Directory (n/c)? **Yes No**

NATURE OF BUSINESS: (also indicate if Home Occupation) \_\_\_\_\_

PROVINCIAL LICENSE NUMBER (if applicable): \_\_\_\_\_

DATE: \_\_\_\_\_ APPLICANT'S SIGNATURE: \_\_\_\_\_

**For Office Use Only**

LICENSE NO: \_\_\_\_\_

APPROVED \_\_\_\_\_ CATEGORY \_\_\_\_\_

APPROVED ON CONDITIONS \_\_\_\_\_

REFUSED \_\_\_\_\_

REVOKED \_\_\_\_\_

**REQUIRED FEE \$** \_\_\_\_\_ **NEW** **RENEWAL**

\_\_\_\_\_  
Signature of License Inspector

<b>Fees:</b>	<b>Resident</b>	<b>Non-Resident</b>
Entire Calendar Year	\$25.00	\$50.00
July 1 - Dec. 31	\$12.50	\$25.00