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BUSINESS LICENCE APPLICATION Resident Business (Mandatory information)

I/we hereby apply for:

New business Change of location Change of owner Change of business name Change of business information

Application date: _____ Start date (New business): _____

Name of business: _____

Mailing address: _____

District of Kent business street address: _____

Business owner(s): _____

Business phone: _____ Cell phone: _____

E-mail: _____

Initial to receive invoices and business licence by email: _____

After business hour contact - name: _____ phone: _____

Home occupation business: Yes No

Is your business within the Agricultural Land Reserve (ALR)? Yes No

Are you renovating or altering the premises Yes No

Detailed description of business (please indicate e.g., Accountant, Plumbing Contractor, etc.): _____

Brief description of business (office use only): _____



BUSINESS LICENCE APPLICATION
Resident Business (Mandatory information continued)

Number of available off-street parking spaces (attach parking plan): _____

Location of off-street loading zone (attach parking plan): _____

Is there another business operating on the same property? Yes (list below) No

Total floor area of building (attach floor plan): m² _____ ft² _____

Business floor area (denote on plan): m² _____ ft² _____

Business enclosed storage area (attach floor plan): m² _____ ft² _____

Business unenclosed storage area (attach site plan): m² _____ ft² _____

Number of employees who reside on property: _____

Number of employees who do not reside on property: _____

Number business use vehicles*: Car _____ Van/Pickup _____ Trailer _____ Other _____

*Do not include vehicles used for non-business (personal/pleasure)

Description, curb weight (kg) and length of other vehicles and length of trailer(s): _____

Do you propose to install business signage on the building or property? Yes (sign permit required) No

B&B/hotel/motel – number of rooms: _____

Apartment – number of units: _____

Mobile home park/campground – number of pads/spaces: _____

Coffee shop/restaurant/pub – seating capacity: _____

If the district created an online directory of businesses, would you be interested in participating? Yes No

Liquor licenses: Yes No

I hereby make application for a Business Licence and declare that the information given in this application to the best of my knowledge is true and correct, and I further agree to comply with all the relevant Bylaws of The Corporation of the District of Kent.

Print Name: _____ Signature: _____

(This section for office use only)

CUSTOMER #: _____

LICENCE #: _____ ROLL #: _____ RECEIPT #: _____

LICENCE FEE CODE: _____ LICENCE FEE AMOUNT: _____

LICENCE FEE CODE: _____ LICENCE FEE AMOUNT: _____

AUTHORIZED BY: _____ DATE: _____

Director of Financial Services

Note: Personal information included on this form is collected solely for the purposes authorized by the Community Charter and is subject to disclosure in accordance with the Freedom of Information and Protection of Privacy Act. If you have any questions about this collection, please contact the Director of Corporate Services at (604) 796-2235.



BUSINESS LICENCE APPLICATION
(Internal checklist)

The following is for office use only

BYLAW ENFORCEMENT Approved Signature: _____ Date: _____

Active file: Yes: No:

Concerns: _____

BUILDING DEPARTMENT N/A Approved Signature: _____ Date: _____

Permit No.: _____

Existing building: _____ New building: _____

Concerns: _____

FIRE DEPARTMENT N/A Approved Signature: _____ Date: _____

Fire inspection required: Yes: No:

Concerns: _____

PLANNING DEPARTMENT Approved Signature: _____ Date: _____

Zoning: _____ Parking: _____

Permitted use: _____ Customer type: _____

Concerns: _____

APPROVALS REQUIRED BY OTHER AGENCIES

Ministry of Health: Yes: No: Approved _____ Date: _____

Liquor Control and Licensing Board: Yes: No: Approved _____ Date: _____

RCMP: Yes: No: Approved _____ Date: _____

Other: _____ Yes: No: Approved _____ Date: _____

COPY OF APPLICATION TO UTILITIES DEPARTMENT? (Tick Box When Done) or N/A

Rate Codes			
030	Carnival/Circus	205	Partial, 1 st Time Resident Business
065	Higher Rate Residential Flat	215	Partial, 1 st Time Higher Rate Residential Flat
095	Higher Rate Residential Per "M ² "	216	Partial, 1 st Time Higher Rate Residential Per "M ² "
200	Resident Business		