



BUSINESS LICENSE APPLICATION FORM

PLEASE NOTE:

All section on this application must be completed before the application can be processed. If any of the fields are irrelevant to your business, please indicate this by enter "N/A".

☐ New Application		☐ Renewal	
Office Use Only	☐ Yearly from May 1st to May 1st.		
	This License will be active on:		
Tsuut'ina Nation Citizen	Citizen ☐	Non- Citizen ☐	
Would You Like Your Business Listed on the Tsuut'ina Nation Directory?			

BUSINESS INFORMATION

Business Name/Trade Name (Operating as Name)				
Corporation Name (if registered):				
Start date of business in the Taza Development				
Days of Operation:				
Hours of Operation				
Number of Employees:	Full Time:	Part Time:	Seasonal:	Casual:
Corporate Structure:	☐ Corporation	☐ Limited Liability	☐ Partnership	☐ Sole Proprietorship

☐	Main Office	☐	Branch
Business Description (50 words or less):			

CONTACT INFORMATION

MAILING ADDRESS			
Street:		PO BOX:	
Town:	Province:	Postal Code:	
Business Phone:		Business Fax	
General Inquiry Email:		Website:	

DECLARATION: I hereby apply for an annual/term business license under the provisions of the Business License Law for Taza Development to provide for the regulating and licensing of all businesses carried on within the boundaries of the Taza Development.

The issuance of a business license by the Development Authority does not authorize or permit the license holder to carry on a business of any pursuit contrary to all other relevant Laws, Policies and Guidelines of the Taza Development and requirements, nor excuse violation of any regulation or act, which may affect this license. Where a business is found to be in contravention of any of the provisions of this or other Taza Development Laws, the Development Authority may temporarily suspend the license until such time as the contravention is rectified.

I hereby certify the information provided is true and accurate to the best of my knowledge. THIS APPLICATION WILL NOT BE PROCESSED IF THE NAME AND SIGNATURE FIELDS ARE LEFT BLANK.

BUSINESS OWNER:

_____	_____	_____
Name	Signature	Date

(AUTHORIZED DIRECTOR OF THE COMPANY:

_____	_____	_____
Tsuut'ina Development Authority	Signature	Date