

THE TOWN OF FORTUNE **BUSINESS APPLICATION**

Section 1- Business Location	Information:			
Civic #:	Street:		Parcel ID #:	
Section 2- Contact Informat	ion:			
Business Name:				
Mailing Address:				
Phone #:		Email:		
Operator:		Mailing Address:		
Phone #:		Email:		
Section 3- Business Informa	tion:			
Business to be located in:	□Existing Space	□Renovated Space	□New Building	□Other
Type of Business:				
Nature of Business:				
Incorporated (if applicable)	Registration:	Regi	stration Date:	
Other Licensing Approval s (i	-			
			-	
*Approval from the Town of 1				
Size of Property (boundary su	rvey or real property su	arvey report required		
Total Floor Space:	# of Storeys	: Park	ing Spaces	
Is there parking available:				
Days/Hours of Operation:				
Existing Property Use:	□Residential	□Commercial	□Vacant □O	ther
Section 4-Applicant Signatu	re:			
I hereby submit this application	on and confirm that the	information supplied is t	o the best of my knowle	doe correct Lagree

on and confirm that the information supplied is, to the best of my knowled appii to comply with all Town Regulations and By-laws, agree to develop in accordance with the plans approved by the Town of Fortune, and not to commence development without written approval and permits from the Town of Fortune. In addition, I acknowledge that I have reviewed this application and agree to provide any additional information requested. NOTE: Where the applicant and property owner are not the same the Signature of the Property Owner will be required before the application can be accepted for processing.

Applicant			
	Print	Sign	Date
Property Owner			
Tropoley Switch	Print	Sign	Date
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