

Westbank First Nation Business Licence Application

To be completed and submitted to the WFN Business Licence Officer prior to commencing any business on WFN lands.

Business Informa

Name of Business								
Description of Bus	siness:							_
Physical Address:				I.R.#	Postal	Code: _		
Phone No.:	F	ax No.:		Email	:			
PIN:	Plan:		_ Lot:		Zon	ning:		
Mailing Address: _					Postal	Code: _		
Phone No.:	F	ax No.:		Email	:			
Notice Address	(If different t	than mailing	- addross)		Postal Code	e:		
No of Unito	•		,		No. of Duof			
No. of Units:	No. of Stat	tions:	Area:	<u>m-</u>	No. of Prof	essionai	S:	
Would you like yo	ur business list	ed in the W	FN Busine	ess Director	y?: Yes	No		
er Information								
Name of Owner 1	:				_ WFN Mem	nber?:	Yes	N
Name of Owner 1 Address:					_			
					Posta	l Code:		
Address:		Fax Numbe	er:	Er	Posta mail:	l Code:		
Address: Phone Number:	:	Fax Numbe	er:	Er	Posta mail:	I Code:	Yes	N
Address: Phone Number: Name of Owner 2	:	Fax Numbe	er:	Er	Posta mail: WFN Men Postal	nber?:	Yes	N
Address: Phone Number: Name of Owner 2 Address:	:	Fax Numbe	nber:	Er	Posta mail: WFN Men Postal Email: _	l Code: mber?: Code: _	Yes	N
Address: Phone Number: Name of Owner 2 Address: Phone Number:	:nal owners, plea	Fax Numbe Fax Num ase attach a	nber:separate s	Er	Posta mail: WFN Men Postal Email: _ e above infor	nber?: Code: _	Yes for each	N
Address: Phone Number: Name of Owner 2 Address: Phone Number: If there are additio Signature:	:nal owners, plea	Fax Numbe Fax Num	nber: separate s	Er	Posta mail: WFN Men Postal Email: _ e above infor	nber?: Code: _	Yes for each	N
Address: Phone Number: Name of Owner 2 Address: Phone Number: If there are additio Signature:	nal owners, plea	Fax Numbe Fax Num ase attach a	nber: separate s	theet with the	Posta mail: WFN Men Postal Email: _ e above infor	nber?: Code: _	Yes for each	N
Address: Phone Number: Name of Owner 2 Address: Phone Number: If there are additio Signature: Applica	nal owners, pleant or Owner (Fax Numbe Fax Num ase attach a second cone cone cone cone cone cone cone cone	nber:separate s	theet with the Date:	mail:Posta WFN Men Postal Email: _ e above info	nber?: Code: _	Yes for each	N
Address: Phone Number: Name of Owner 2 Address: Phone Number: If there are additio Signature: Applica Ovals (To be com	nal owners, plea	Fax Numbe Fax Num ase attach a a Circle one Business I	nber: separate s) Licence (theet with the Date:	mail: Posta	nber?: Code: _	Yes for each	N n.

Community. Leadership. Pride.



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Guide and Instructions

PLEASE READ CAREFULLY BEFORE COMPLETING A BUSINESS LICENCE APPLICATION

General

Every person who carries on a business or provides a service of any kind on Westbank First Nation lands is required to hold a valid licence to do so. A business licence must be obtained before commencement of the business or service.

Application

A completed Business Licence Application Form must be submitted for approval to the WFN Business Licence Officer. The WFN Business Licence Officer can be contacted by calling WFN offices at (250) 769-4999 between 8:30am and 4:30pm, Monday to Friday.

Approvals

Please note that some businesses require approvals issued by other agencies such as the West Kelowna Fire Department, Health Canada and WFN Engineering. It is the responsibility of the applicant to ensure that they have these approvals in place before submitting a Business Licence Application Form. The Business Licence Officer will only issue a Business Licence where the applicant has supplied proof of all required approvals. For information concerning what approvals your business might require, contact the WFN Business Licence Officer by calling WFN offices at (250) 769-4999 between 8:30am and 4:30pm, Monday to Friday.

Addresses

The Physical Address is the address of the physical location of your business. The Mailing Address is the address to which you would like your business mail to be sent. The Corporate Address is the address of the registered records office of your business. If these addresses are the same, please write "Same as above" in the space provided.

Zoning

All proposed businesses must comply with WFN zoning laws. It is the responsibility of the applicant to ensure that their business complies with these laws. The Business Licence Officer will only issue a Business Licence where the proposed business complies with all WFN zoning laws.

Fees

Business Licence fees are set out in the Schedule to the WFN *Business Licence Law 2005-17*. The full fee is payable at the time of application and a Business Licence will not be issued until the applicable fee is paid in full. Fees are prorated after July 1 for the initial application. Business licences must be renewed annually on January 1.

For questions concerning other approvals please contact:

Health Canada - Alec Johnson: (250) 470-5098
West Kelowna Fire Department - Bryan Collier
WFN Building Inspection - Grant Trask (250) 769-2431
WFN Utilities Inspection - Travis Fosbery (250) 862-1743

For questions concerning this application please contact:

WFN Business Licence Admin - Jolene Fosbery Suite 201 - 515 Hwy 97 South Kelowna BC V1Z 3J2

Phone: (250) 769-4999 Fax: (250) 769-2441

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