

**NORTHERN VILLAGE OF GREEN LAKE  
BUSINESS LICENSE APPLICATION – HOME BASED**

Application Date: \_\_\_\_\_ Total Fee Due: \_\_\_\_\_

Application Type:

New Business or License Renewal

New Business after July (50% fee)

Change of Information

Please make cheque payable to: Northern Village of Green Lake  
Box 128  
Green Lake, SK S0M 1B0

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**Business Information – Please print clearly**

Business Name (operating name): \_\_\_\_\_

Business Owner's Name: \_\_\_\_\_

Address of Business: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_

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**Business Description (Please print clearly)**

Land Zoning Designation: \_\_\_\_\_

Legal Description of Land Location: Lot \_\_\_\_\_ Block \_\_\_\_\_ Plan No. \_\_\_\_\_

Please describe the primary function of the business (what goods and services are to be provided): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What will be the days of operation?  Mon-Fri  7days/wk  24 x 7  Part-time

Do you reside at the business location?  Yes  No If not where: \_\_\_\_\_

Do you have clients or customers coming to your residence?  Yes  No

How many people work at this site? \_\_\_\_\_ Where do they park? \_\_\_\_\_

List any equipment used to operate the home based business: \_\_\_\_\_

\_\_\_\_\_

In connection with your business do you require equipment, materials or vehicles to be stored? Where and how much: \_\_\_\_\_

\_\_\_\_\_

What is the floor area of your home in square feet? \_\_\_\_\_ What is the square footage of your home you use to conduct your home-based business? \_\_\_\_\_

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**Declaration of Applicant**

- ❖ I am aware that a business license is only valid for the address on the application and the owner that submitted the application. Any changes in location, ownership, or use without notification to the Northern Village of Green Lake will result in my business license becoming null and void.
- ❖ Bylaw 08/2008 requires all businesses to obtain a Business License before beginning operation.
- ❖ Every license shall be valid until the end of each calendar year (December 31).
- ❖ Your business license must be displayed prominently at the place of business.
- ❖ This is an application only, Your license will be provided within 10 days if approved

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

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**FOR OFFICE USE ONLY:**

Zoning Designation: \_\_\_\_\_ Checked by: \_\_\_\_\_

Proposed Use: \_\_\_\_\_ Date: \_\_\_\_\_

Approved:  Yes  No

Reason: \_\_\_\_\_