



BUSINESS LICENCE APPLICATION

This application is made on behalf of (Name of Business):

Whose (general area & mailing) address is:

Telephone: _____ Fax No: _____

for a licence under the provisions of the *Business Licence Act* for the purpose of carrying on the business of :

(where will the business be operating) _____,

Northwest Territories during the fiscal year ending March 31, 2018.

CHECK THIS BOX IF YOU ARE SELF-EMPLOYED

CHECK THIS BOX IF YOU HAVE EMPLOYEES AND ATTACH A COPY OF A PROOF OF REGISTRATION LETTER FROM WORKERS' SAFETY AND COMPENSATION COMMISSION

FORWARD APPLICATION TO:

**Business Licensing
Municipal and Community Affairs
Government of the Northwest Territories
600 5201 50 AVENUE NORTHWEST TOWER
YELLOWKNIFE NT X1A 3S9
PH: (867) 767-9161 EXT:21021
Fax: (867) 873-0309**

Print name of Applicant

Signature of Applicant

Position