



**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, 2021.

- 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**