



Business License Application

4210-4th Avenue
 Whitehorse, YT
 Y1A 1C2
 P: (867) 668-8346
 F: (867) 668-8395

Filing Date

This is an application for: (check all that apply)
 New Business Change of Ownership Change of Mailing Address Change of Address (requires zoning approval)
 Change of Business Name – (Current business name: _____)

Business Name _____

Nature of Business _____ Number of Local Employees (include self) _____

Owner(s)/Licencee(s) _____

Business Location _____

Mailing Address (if different from Business Location) _____

Business Telephone # _____ Business Fax # _____ Business Email Address _____

Local Contact _____ Emergency Telephone # _____ Business Start Date _____

Type of Business (check all that apply and indicate total floor area in square feet or square metres)
 Retail (_____) Liquor Licenced (_____) Home-based (requires Development Permit)
 Wholesale (_____) Accommodation (# of Rooms/units _____) Mobile Home Park (# of spaces _____) Other (see below)

Other Business Description _____

Are you renovating or altering the premises?
 Yes No If Yes please describe: _____

IMPORTANT NOTICE

By submitting this Business License Application, the above-named applicant hereby declares that all the above information is correct and that they will comply with the bylaws and regulations of the City of Whitehorse.

Signature _____

This Section for Office Use Only

Department	Approval	Date	Comments	Other
City Planning				
City Building Inspection				
Yukon Government - Environmental Health				
Workers Compensation				
Corporate Affairs & Expiry Date	License # & Class Code			Fee