



Business License Application

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

adminbuilding@whitehorse.ca

Filing Date

This is an application for: (check all that apply)

New Business
 Personal Name Change
 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)/Licensee(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 Licensed (_____)
 Home-based (requires Development Permit)

Food Services (_____)
 Accommodation (# of Rooms/units _____)
 Mobile Home Park (# of spaces _____)
 Other (see below)

Other Business Description

Are you renovating or altering the premises? If Yes please describe:

Yes
 No

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
Development Officer				
City Building Inspection				
Yukon Government - Environmental Health				
Workers Compensation				
Corporate Affairs & Expiry Date	License # & Class Code			Fee