

**Corporation of the Village of McBride**

100 Robson Centre - 855 SW Frontage Road

PO Box 519, McBride, B.C. V0J 2E0

Phone: 250-569-2229 Fax: 250-569-3276

**Business License  
Application 2024****APPLICATION FOR (CHECK ALL THAT APPLY):**☐ License Renewal   ☐ New Application   ☐ Change of Ownership   ☐ Updated Contact or other Info

<b>Business Name:</b>			
<b>Type of Business:</b>			
<b>Business Location Address:</b>			
<b>Business Phone:</b>		<b>Business Fax:</b>	
<b>Website Address:</b>			
<b>Social Media:</b>		<b>Business Email:</b>	

I give my permission for my business (and above business information) to be listed by the Village of McBride in a promotional business directory online at [www.mcbride.ca](http://www.mcbride.ca). The business directory is currently under development.

☐ Yes   ☐ No**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>Applicant Info</b>	<b>Applicant Name(s):</b>			
	<b>Mailing Address:</b>		<b>Town:</b>	<b>Postal Code:</b>
	<b>Contact Phone:</b>		<b>Fax:</b>	
	<b>Email:</b>			
<b>Property Info</b>	<b>Property Zoning:</b>		<b>Principal Use:</b> (i.e. retail, storage, restaurant)	
	<b>Business Licence Bylaw Category and Fee:</b> (please check one) For more information see Business License Bylaw No. 752, 2014 at <a href="https://www.mcbride.ca/village-office/bylaws-policies">https://www.mcbride.ca/village-office/bylaws-policies</a>			
	<input type="checkbox"/> Commercial - \$100	<input type="checkbox"/> Farmers Market - \$100	<input type="checkbox"/> General Contractor - \$100	<input type="checkbox"/> Home Business - \$50
	<input type="checkbox"/> Mobile Vendor - \$100	<input type="checkbox"/> One-Time-Only Mobile Vender (per event) - \$25	<input type="checkbox"/> Carnival - \$250	<input type="checkbox"/> Commercial Landlord - \$100
	Health Permit obtained from Northern Health? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		Provincial Registration? Yes <input type="checkbox"/> No <input type="checkbox"/>	

I/We \_\_\_\_\_ the undersigned, hereby make applications for a business licence in accordance with the particulars as above stated and declare the above statement to be true and correct. I/We further declare that if I/We are granted the licence applied for **I/We will comply with the provisions of this bylaw and all other laws and/or regulations now in force or which may hereinafter come into force in the Village of McBride.**

☒ \_\_\_\_\_ ☒ \_\_\_\_\_

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Return this completed form along with payment (cheque, cash, debit) to:

Village of McBride  
100 Robson Centre, 855 SW Frontage Rd.  
PO Box 519  
McBride, BC  
V0J 2E0

Forms can be emailed to: [mcbride@mcbride.ca](mailto:mcbride@mcbride.ca)

FOR OFFICE USE ONLY	
Date Received: _____	Zoning Confirmed and Approved: _____ Initial
Staff Signature: _____	Date of Approved: _____
Business License No. _____	Folio: _____