

Telephone: (204) 753-5100 Fax: (204) 753-2770 www.pinawa.com

BUSINESS APPLICATION FOR LICENSE

☐ Home Based	☐ Transient Trader	☐ Mobile	Seasonal
The undersigned hereb	y applies for a License as follow	s:	
Name		Name of Business	
Mailing Address		Business Address	
Phone:		Email:	
Type of Product:			
Mobile Vending Unit			
a) Health Inspector's Co	ertificate		
b) Proof of Insurance			
above stated and dec the By-laws now in for	clare that all statements made ir	the application are true and force in the Local Governm	ent District of Pinawa. I/We will
Signature		Date	
	FOR OF	FICE USE ONLY	
License Fee:	\$105 (7 days) \$500 (season – MOU Required)		
Signature:			