



## County of Wetaskiwin No. 10

Box 6960

Wetaskiwin, AB T9A 2G5

[780] 352-3321 (phone) [780] 352-3486 (fax)

### ***APPLICATION FOR APPROVAL OF BUSINESS***

Name of Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

#### **LEGAL LAND DESCRIPTION:**

Lot \_\_\_\_\_ Block \_\_\_\_\_ Plan \_\_\_\_\_ and/or

Quarter \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ West of the 4th/5th Meridian

Name of Business: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Days and Hours of Operation: \_\_\_\_\_

Number of employees: \_\_\_\_\_

Are you planning to sell products? Yes or No

Outside Storage of Materials Required? Yes or No, if yes, please describe \_\_\_\_\_

Is there going to be excess noise created? Yes or No

Is there going to be increased traffic? Yes or No

The personal information on this form is collected under the authority of Section 33 (c) of the Alberta *Freedom Of Information And Protection Of Privacy Act*. The information will be used to process your application(s) and your name and address may be included on reports that are available to the public. If you have any questions on the collection and use of this information, please contact the FOIP Coordinator at (780) 352-3321.

Signature of applicant: \_\_\_\_\_ Signature of Landowner(s): \_\_\_\_\_

Date: \_\_\_\_\_

*If there is any additional information you feel is relevant, please write on back of application.*

