

Town of Georgina

| LIGENIAE EEE | □ # 0000 |
|--------------|-----------------|
| LICENCE FEE | □ \$2000.00 |

BODY RUB PARLOUR

Personal information is being collected under the authority of the *Municipal Act, 2001*, as amended, for the purposes of reviewing this application. Questions regarding the collection of personal information should be directed to the Town of Georgina, 26557 Civic Centre Rd., Keswick, Ontario, L4P 3G1, telephone 905-476-4301 Clerk's Department.

| Date Submitted: | | | | | | | | | |
|----------------------------------|-----------------------------|------------------------|------------|----------------|----------|--------|-------------|-----------|------------------|
| Applicant Information | | | | | | | | | |
| Full Name | Last | Last | | | | First | | | Middle Initial |
| Address | Stree | treet Name & Number | | | | | P.(| O.Box | Apartment/Unit # |
| City/Town | | | , | Province | | | Po | stal Code | |
| Home Phone | | | | Business Phone | | | | | |
| E-Mail Address | | | Fax Number | | | | | | |
| Company Name | | | | | | | | | |
| Operating Location Addres | ss | | | | | | | | |
| Owner(s) of Property Information | | | | | | | | | |
| Name(s) | | Last | | | First | | | | Middle Initial |
| Company Name | | | | | | | | | |
| Address | | Street Name and Number | | | | PO Box | | | |
| City/Town | | | Province | | | | Postal Code |) | |
| Home Phone: | Home Phone: Business Phone: | | | | | | | | |
| E-Mail Address: | | | | F | ax Numbe | er: | | | |
| Continued on page 2 | | | | | | | • | • | |

Continued on page 2

| Consen | t of Property Owner (If App | licant is Not the Registered Owner) | | | |
|---|---|---|--|--|--|
| I/We | being the re | gistered owner(s) of the subject lands, hereby | | | |
| authorize | norizeto submit the enclosed application to the Clerks Division and | | | | |
| to provide any in | to provide any information or material required by the Clerks Division relevant to the application. | | | | |
| Dated at the Tov | wn/City of Georgina | | | | |
| this | day of | 20 | | | |
| | | | | | |
| S | Signature of Owner | Signature of Co-Owner | | | |
| | Required Information | For Your Application | | | |
| The following is requ Georgina Zoning By | uired in accordance with Town of Georgin | na Licensing By-law No. 2002-0169(L1-3) and the Town of | | | |
| 1. Complete | ed Application Form | | | | |
| | Fee (cash, cheque, debit, credit) ed below – applicable if application returned | | | | |
| 3. Photo ID Current gove | ernment issued photo identification show | ing proof of age | | | |
| 4. List of all persons working at parlour including proof of age Full name, phone number & address, copy of current and valid photo id | | | | | |
| 2002-01 • All regist | rubbers shall complete a full registration 69 (LI-3) schedule 4, section 7(2)(a) | form prior to performing as set out in Licensing by-law ation for licence and upon hire of new body rubbers after | | | |
| All buildNumber | that shows all of the following lings & structures on property r of existing parking spaces building & structure setbacks to lot lines | | | | |
| Layout of | n showing the following of the store/premise and entrances to the premise, including | marking all emergency fire exits | | | |

Clearly designate use of rooms

Required Information For Your Application

8. Insurance Certificate or Policy:

Must cover each vehicle or certificate endorsed to show the License Issuer shall be given at least 5 days notice in writing of any cancellation, expiration or variation in the amount of the policy, and insuring in at least the following amounts: Bodily injury or death to a limit of at least \$2,000,000.00 (exclusive of interest and costs) against all claims for personal injury, including injury resulting in death, and property damage, with an inclusive limit of not less than \$2,000,000.00.

9. Permission of Property Owner:

Where the applicant is not the owner of the property from where he/she will be operating, such applicant is required to have the property owner fill out pages 1 & 2 of this application authorizing the use of the property for such purposes.

10. Copy of Lease

If applicant is not the owner of the property they shall submit a copy of the lease agreement between the applicant and the property owner.

11. Please supply one of the following where applicable (check all that apply):

| ☐ Business Registration | □ Partnership Documentation | ☐ Articles of Incorporation |
|-------------------------|-----------------------------|-----------------------------|
| L Dusiness Negistration | | Articles of incorporation |

| Signature of Applicant | | | | |
|--|------------------------|--|--|--|
| I, of the Town/City of | | | | |
| In the County/Region of | solemnly declare that: | | | |
| All of the above statements and the statements contained in all of | the exhibits submitted | | | |

herewith are true and I make this solemn declaration, conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of the Canada Evidence Act.

As of the date of this application, I am (circle of the following) the Applicant or the Agent, I have examined the contents of this application, I certify as to the correctness of the information

submitted with the application insofar as I have knowledge of these facts, and I concur with the submission of this application to the Municipality.

I understand that all the information, documents and drawings and plans provided with this application will be made available to the public, as required but the provisions of the *Municipal Act, 2001*, as amended.

| | | Signature of Appl | icant | |
|--|--|----------------------|-------|--------------------------|
| Declared before me at the Town/City | | | | |
| | | | | |
| of | | in the County/Region |) | |
| of | | This |) | |
| of | | 20 |) | Signature of Owner/Agent |
| | | | | |
| | | | | |
| Signature of Commissioner, Notary Public, etc. | | | | |

LATE PENALTY: In addition to the fee required to be submitted as set out in Appendix 'A', a late penalty equal to 50%