

DATE (MM/DD/YYYY)

## **OFFICE OF THE CITY CLERK**

Policy, Gaming & Licensing 350 City Hall Square West - Suite 110 Windsor, ON N9A 6S1 Ph: 519-255-6200, Option 1 Fax: 519-255-6868

SIGNATURE OF APPLICANT & TITLE

www.citywindsor.ca

HAWKER/PEDLAR APPLICATION						OFFICE USE ONLY LICENCE #		
(3 PAGES)								
APPLICAN	NT NAME AN	D ADDRESS						
								(MM/DD/YYYY)
APPLICAN	NT NAME:					F BIRTH:		
						HOME PHONE:		
STREET A					CELL PHONE:			
CITY, PRO					POSTAL CODE:			
	S NAME AND	ADDRESS						
NAME UNI						PLEASE INDICATE WITH A CHECK MARK:(√)  Corporation Sole Proprietorship Partnership		
WHICH BU				Corporation	on Sole Pro	prietors	hip Partnership	
OPERATE	<b>5</b> :			DUE DU	IONE:			
STREET A	DDDESS.				BUS. PHONE:			
CITY, PRO						FAX NUMBER: POSTAL CODE:		
•		DE BLISIMESS J	F DIFFERENT THAN AB	OVE		. CODE:		
WAILING	ADDRESS FO	JK BOSINESS, II	F DIFFERENT THAN AD			ROVINCE:		
STREET A	DDBESS.				POSTAL			
JIKEEI A		ENCE CATEGO	PV		FOSTAL	LICENC	E EEE	9
					NEW	\$232.00	, L I L L	NO RENEWAL
HAWKER/ PEDLAR			S (3 MONTH PERIOD)			\$232.00		NO RENEWAL
IEDEAN		DOOR TO DOOR S	,					RENEWAL- \$191.00
HAWKER/		DOOR TO DOOR S			NEW \$191.00			RENEWAL- \$191.00
PEDLAR		GENERAL HAWKE			NEW \$191.00			RENEWAL - \$191.00
CLASS 5 - GENERAL H		SENERAL HAVING	-11		NEW \$131.00		KENEVAL - \$131.00	
MUNICIPAL I	PHOTO ID CAR	D ISSUED FOR BUS	ID CARD. THE COST FOR TH INESS LICENSING PURPOSE HE REPLACEMENT OF ANY L	S IS T	THE PROPER' OR STOLEN I	TY OF THE CIT PHOTO ID CAR	TY ÓF WI RDS	INDSOR. THERE WILL
HAVE VOLLE	VED HAD ANY	PREVIOUS MUNICIF	PALLICENCE/S\2			BEEN CONVIC		ANY OTHER
			AL LICENCE(3):		INTRY?		ADA OK	ANT OTHER
1-1-			YES		NO	NO IF YES: Year?		
		What year?					ation?	
			DOCUMENTS WITH TH					
older than	n 30 days) `	lass 3,4 & 5) (not	List of Employees and Licence Nu (Class 4)			2 & 3)		
	Employment (C	-	Certificate of Incorporation, if applic		applicable		Master Business Licence, if applicable Site Plan (Class 1&2)	
Property Use Permission Letter (Class 1&2) Insurance Policy (Class 1 & 2) Site Plan (Class 1&2)  Proof of Right to Occupy Premises (Class 3)								
Proof of Work Status (2) pieces of government-issued identification including one photo I.D. as well as one I.D. demonstrating proof of status in								
Valid Photo Identification Canada (e.g. birth certificate, Canadian passport, Canadian citizenship card, permanent resident card, work permit, etc.  DEPARTMENT DISTRIBUTION ONLY								
Building – Zoning Clearance (Class 1 & 2 )								
PLEASE RETURN THIS APPLICATION WITH YOUR PAYMENT TO THE OFFICE OF THE CITY CLERK/POLICY, GAMING & LICENSING DIVISION AT 350 CITY HALL SQUARE WEST, ROOM 203, WINDSOR, ON N9A 6S1. THE LICENCE RENEWAL DEADLINE IS MAY 31 ST ANNUALLY. A 50% LATE PENALTY IS ADDED TO THE BUSINESS LICENCE FEE ON JUNE 1ST. THE APPLICANT COULD FACE FURTHER PENALTIES/FINES FOR OPERATING WITHOUT A VALID BUSINESS LICENCE.								
NOTICE WITH RESPECT TO COLLECTION OF PERSONAL INFORMATION								
I acknowledge that the information requested on this form and any appendices attached are collected under the authority of the Municipal Act, City of Windsor Act, and City of Windsor Licensing By-law 395-2004. This information is required in order to process, issue, monitor, regulate and investigate the various licenses issued by the Office of the City Clerk, Policy, Gaming & Licensing Division. The name and business address of the licensee is public information. Any other personal information collected will only be used for investigative purposes. Questions regarding this collection can be made to the Supervisor of Licensing, 350 City Hall Square W. Suite 110, Windsor, ON N9A 6S1, 519-255-6200.								



## **OFFICE OF THE CITY CLERK**

Policy, Gaming & Licensing 350 City Hall Square West - Suite 110 Windsor, ON N9A 6S1

Ph: 519-255-6200, Option 1 Fax: 519-255-6868

www.citywindsor.ca

HAWKER/PEDLAR APPLICATION-PAGE 2					
I hereby make application	on under By-law 395-2004 for an F	lawker/Ped	dlar Licence.		
BUSINESS NAME:					
BUSINESS ADDRESS:					
THE FOLLOWING SECTION	N FOR NEW APPLICATIONS ONLY				
IF THE COMPANY IS <u>INCORPORATED</u> , PLEASE PROVIDE THE FOLLOWING:					
LETTERS OF INCOR	LETTERS OF INCORPORATION (NOTARIZED COPY IS ACCEPTABLE)				
LIST OF SHAREHOL	DERS				
IF THE COMPANY IS	A <u>PARTNERSHIP,</u> PLEASE PROVID	E THE FOLI	_OWING:		
A DECLARATION SI	GNED BY ALL PARTNERS DECLAR	NG THE FU	LL NAME OF EVERY PARTI	NER AND THE	
ADDRESS OF THEIR	R NORMAL RESIDENCE				
PLEASE INDICATE BY CH	ECKMARK THE CLASS BEING APPLI	ED FOR			
CLASS 1 – TEMPORAL	RY VENDING SITE	CLAS	CLASS 4 – DOOR-TO-DOOR SALES PERSON		
CLASS 2 – SEASONAL SALES (UP TO 3 MONTHS)			CLASS 5 – GENERAL HAWKER		
CLASS 3 - DOOR-TO-	DOOR SALES				
PLEASE LIST THE PROPO	SED LOCATION OF YOUR OPERATION	ON IN THE C	ITY AND DATES OF DURA	TION OF OPERATION	
MUNICIPAL ADDRESS(ES)	:		FROM: (MM/DD/YYYY)	TO: (MM/DD/YYYY)	
NUMBER OF DAYS OF PROPOSED SALE:					
NUMBER OF SALES PERSONNEL FOR THIS SALE EVENT(S):					
TYPE OF MERCHANDISE T	TO BE SOLD*:				
*As per The Consumer Protection Act, 2002 (CPA), the following products and services are not permitted to be sold via door-					
to-door sales: furnaces, air conditioners, air cleaners, air purifiers, water heaters, water treatment devices, water purifiers,					
water filters, water softeners, duct cleaning services and/or any good or service that performs or combines one or more of the					
above functions.					
NOTICE WITH RESPECT TO COLLECTION OF PERSONAL INFORMATION					
I acknowledge that the information requested on this form and any appendices attached are collected under the authority of the Municipal Act, City of Windsor Act, and City of Windsor Licensing By-law 395-2004. This information is required in order to process, issue, monitor, regulate and investigate the various licenses issued by the Office of the City Clerk, Policy, Gaming & Licensing Division. The name and business address of the licensee is public information. Any other personal information collected will only be used for investigative purposes. Questions regarding this collection can be made to the Supervisor of Licensing, 350 City Hall Square W. Suite 110, Windsor, ON N9A 6S1, 519-255-6200.					
DATE (MM/DD/YYYY	<u>)                                    </u>	SIC	SNATURE OF APPLICANT & TI	TLE	



## OFFICE OF THE CITY CLERK

Policy, Gaming & Licensing 350 City Hall Square West - Suite 110 Windsor, ON N9A 6S1

Ph: 519-255-6200, Option 1 Fax: 519-255-6868

www.citywindsor.ca

HAWKER/PEDLAR APPLICATION-PAGE 3					
NAME(S) O	F SALES PERSONNEL				
NAME:					
PLEASE S	STATE THE HOURS OF OPERATION. FROM:	TO:			
DO YOU H	IAVE A PROPERTY USE PERMISSION LETTER FORM THE PROPERTY OWNER	YES	NO		
	*** NOTE: IF APPLYING FOR CLASS 1 OR 2, THIS LETTER IS MANDA	TORY ***			
SUPPLIMENTAL INFORMATION FOR SEASONAL SALES					
IS YOUR OCCUPATION FARMING?  YES  NO					
ARE YOU LIVING UPON AND TILLING THE LAND DESCRIBED ON THIS APPLICATION?  YES  NO					
ARE ALL OF THE GOODS TO BE SOLD GROWN OR PRODUCED ON THE FARM?  YES  NO					
BY MAKING	APPLICATION, I ACKNOWLEDGE THAT:				
THE ABOVE IS THE ONLY BUSINESS OPERATED AT THESE PREMISES WHICH REQUIRES A MUNICIPAL LICENCE IN ACCORDANCE WITH THE BY-LAWS OF THE MUNICIPALITY;					
I SHALL NOT COMMENCE OPERATION WITHIN THE CITY OF WINDSOR UNTIL THE FORMAL LICENCE IS ISSUED TO ME;					
• I AM ALSO REQUIRED TO COMPLY WITH ALL MUNICIPAL BY-LAWS INCLUDING, BUT NOT LIMITED TO, SIGN BY-LAW 250-2004 AND PROPERTY STANDARDS BY-LAW 3-2006, THROUGHOUT THE DURATION OF THE LICENSING PERIOD.					
APPLICANT'S INITIALS					

## NOTICE WITH RESPECT TO COLLECTION OF PERSONAL INFORMATION

I acknowledge that the information requested on this form and any appendices attached are collected under the authority of the Municipal Act, City of Windsor Act, and City of Windsor Licensing By-law 395-2004. This information is required in order to process, issue, monitor, regulate and investigate the various licenses issued by the Office of the City Clerk, Policy, Gaming & Licensing Division. The name and business address of the licensee is public information. Any other personal information collected will only be used for investigative purposes. Questions regarding this collection can be made to the Supervisor of Licensing, 350 City Hall Square W. Suite 110, Windsor, ON N9A 6S1, 519-255-6200.

DATE (MM/DD/YYYY)	SIGNATURE OF APPLICANT & TITLE