THE CITY OF WINDSOR
ONTARIO, CANADA

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

FOOD STORE APPLICATION (2 PAGES)

OFFICE USE ONLY
LICENCE #_____

APPLICANT NAME AND ADDRESS

APPLICANT NAME:		DATE OF BIRTH: (MM/DD/YYYY)	
STREET ADDRESS:		HOME PHONE:	
		CELL PHONE:	
CITY, PROVINCE:		POSTAL CODE:	

BUSINESS NAME AND ADDRESS

CORPORATION NUMBER AND OPERATING NAME:		PLEASE INDICATE WITH A CHECK MARK:(√) Corporation ☐ Sole Proprietorship ☐ Partnership ☐	
STREET ADDRESS:		BUS. PHONE:	
		EMAIL ADDRESS:	
CITY, PROVINCE:		POSTAL CODE:	

MAILING ADDRESS FOR BUSINESS, IF DIFFERENT THAN ABOVE:

STREET ADDRESS:		CITY, PROVINCE:	
		POSTAL CODE:	

LICENCE CATEGORY	LICENCE FEES	
CLASS OF LICENCE	NEW	RENEWAL
FOOD STORE	☐ $397.00	☐ $255.00
TOBACCONIST – ANCILLARY	☐ $337.00	☐ $255.00

HAVE YOU EVER HAD ANY PREVIOUS MUNICIPAL LICENCE(S)?
YES ☐ NO ☐ IF YES: What type?_____
What year?_____

HAVE YOU EVER BEEN CONVICTED OF ANY CRIMINAL OR INDICTABLE OFFENCE IN CANADA OR ANY OTHER COUNTRY?
YES ☐ NO ☐ IF YES: Year?_____
Location?_____

PLEASE ENCLOSE THE FOLLOWING DOCUMENTS WITH THIS APPLICATION:

	Windsor/Essex Board of Health Approval (519-258-2146)		Business Ownership Declaration Form
	Certificate of Incorporation including Directors, if applicable		Business Name Registration or Franchise Agreement, if applicable
	Proof of Work Status Valid Photo Identification	*(2) pieces of government-issued identification including one photo I.D. as well as one I.D. demonstrating proof of status in Canada (e.g. birth certificate, Canadian passport, Canadian citizenship card, permanent resident card, work permit, etc.*	

DEPARTMENT DISTRIBUTION ONLY:

	Building-Zoning Clearance		Public Works – Pollution Control

THE LICENCE RENEWAL DEADLINE IS ON FEBURARY 28th ANNUALLY. A 50% LATE PENALTY IS ADDED TO THE BUSINESS LICENCE FEE ON MARCH 1st. THE APPLICANT COULD FACE FURTHER PENALTIES/FINES FOR OPERATING WITHOUT A VALID BUSINESS LICENCE

NOTE: APPLICATIONS ACCEPTED UNTIL 3:30 PM MONDAY-FRIDAY, EXCEPT HOLIDAYS

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

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FOOD STORE APPLICATION-PAGE 2

OFFICE USE ONLY
LICENCE #_____

I hereby make application under By-law 395-2004 for a Food Store Licence.

BUSINESS NAME:	
BUSINESS ADDRESS:	

PLEASE INDICATE BY CHECKMARK THE TYPE OF SERVICE(S) CONDUCTED AT THE ABOVE NOTED BUSINESS

		YES	NO
1.	DO YOU SELL PREPACKAGED AND/OR UNPACKAGED FOOD?		
2.	IS THE SALE OF FOOD ITEMS YOUR PRIMARY BUSINESS? (EXAMPLE: CONVENIENCE STORE, GROCERY STORE)		
3.	ARE TOBACCO PRODUCTS SOLD ON THE PREMISES?		
4.	DO YOU PREPARE MEALS OR MEAL PORTIONS (EXAMPLE: SANDWICHES, PIZZA BY THE SLICE, INCLUDING SCOOPING ICE CREAM OR OTHER FROZEN CONFECTIONARIES, WHICH ARE SOLD OVER A COUNTER?		
5.	DO YOU COOK/WARM/HEAT FOOD ON THE PREMISES?		
6.	IS FOOD COOKED WITH GREASE AND/OR OIL?		

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_____ _____

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