



THE TOWN OF TORBAY

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TORBAY, NL
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BUSINESS DEVELOPMENT APPLICATION FORM

OFFICE USE ONLY:

DATE RECEIVED:

APPLICATION FEE \$:

STAFF INITIALS:

PERMIT NO.:

B

(A) APPLICANT INFORMATION

APPLICANT: _____ HOME PHONE: _____
MAILING ADDRESS: _____ WORK PHONE: _____
_____ FAX NUMBER: _____
_____ E-MAIL: _____

(B) PROPOSED BUSINESS INFORMATION

NAME OF BUSINESS: _____ HOME BASES BUSINESS: YES NO
LOCATION OF BUSINESS: _____ SIZE OF SPACE BEING USED (Area): _____
TYPE OF BUSINESS: _____ OFFICIAL START DATE: _____
IS THIS BUSINESS REGISTERED WITH: PROVINCIAL GOV. FEDERAL GOV.
NUMBER OF EMPLOYEES: FULL-TIME _____ PART-TIME _____

I hereby submit this application and confirm that the information supplied is correct.

I agree to comply with all Municipal Regulations and agree to develop in accordance with the plans approved by the municipality, and not to commence Development without applicable written approval and permits from the municipality.

Applicant: _____

Date: _____

IMPORTANT

1) Any cost incurred by the Town of Torbay, will be billed back to the applicant

**This Application is to be submitted no later than noon, the Thursday prior to the Council Meeting
Council Meeting Times and Dates can be determined by calling the Town of Torbay Office**