



Application for Multiple-Family Dwelling Licence

Address of Property: _____

I (we): _____
(Applicant – Name or Corporation Name)

of: _____
(Applicant Mailing Address) (City) (Province) (Postal Code)

hereby apply for a Business Licence to operate the above-named Multiple-Family Dwelling, to commence on the _____ day of _____, 20_____.

Applicant Contact Information

Phone Number: _____
(Primary) (Alternate)

Email Address: _____

Property Information

Owner of Building: _____

Does Owner Reside On-Site? YES NO

Management Company/Caretaker: _____

Management Company/Caretaker Contact: _____
(Phone) (Email)

Property Description

Number of Storeys: 1 2 3 Basement: YES NO

	Total Number of Units per Floor	Number of Self-Contained Dwelling Units per Floor	Number of Rental Rooms with Shared Kitchens and/or Bathrooms per Floor
Basement			
Main Floor			
Second Floor			
Third Floor			
TOTAL			

I (we) hereby certify that the information provided in this application is correct and acknowledge that any false statement made in this application may result in the revocation of the business licence and/or prosecution:

(Signature of Applicant)

(Date)

THIS DOCUMENT IS NOT A LICENCE

Revised February 3, 2023