



Village of Glenwood

Business Licence Application

Business Details (Please Print)

Legal Business Name: _____

Proprietor(s): _____

Contact Person(s): _____

Business Address: _____

Business Description: _____

Business Licence Applying for (check one): Municipal: Regional:

I CERTIFY THAT ALL INFORMATION PROVIDED BY ME ON THIS FORM IS, TO THE BEST OF MY KNOWLEDGE, CORRECT AND TRUE. I AGREE TO ALLOW THE VILLAGE OF GLENWOOD TO INVESTIGATE MY SUITABILITY TO HOLD A MUNICIPAL AND/OR REGIONAL BUSINESS LICENCE.

Signature

Date of Application