

Town of Davidson  
Box 340, 206 Washington Avenue  
Davidson, SK S0G 1A0  
www.townofdavidson.com  
Phone: 306-567-2040 Fax: 306-567-4730  
Email: townofdavidson@sasktel.net



**BUSINESS LICENSE**

**APPLICATION**

**RENEWAL**

**General Business Information (Please Print)**

Applicant Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

**Description of Business**

Operating Name of Business: \_\_\_\_\_

Civic Address of Business: \_\_\_\_\_

Description of Business: \_\_\_\_\_

Number of Employees: \_\_\_\_\_ Business Start Date: \_\_\_\_\_

**Owner Information**

Owner Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

**Type of Business**

- |  |  |
|--|--|
| <input type="checkbox"/> Home-Based \$ 50.00                             | <input type="checkbox"/> Store Front \$ 100                                  |
| <input type="checkbox"/> Contractor \$ 250.00                            | <input type="checkbox"/> Direct Seller (Door to Door/Telephone Sales) \$ 100 |
| <input type="checkbox"/> Contractor (Self Employed- No Employees) \$ 100 | <input type="checkbox"/> Transient Trader \$ 100                             |

I/We authorize the contact information and website address of the above business to be advertised on the Town of Davidson website.  Yes  No

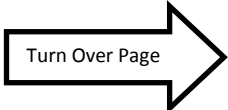
\*The issuing of a license to a person by the Town of Davidson does not relieve the person of the responsibility to obtain any federal/provincial license that may be required by law. (Initial)

I hereby agree to comply with the Building, Business and Zoning Bylaws of the Town of Davidson and acknowledge that it is my responsibility to ensure compliance with these and any other applicable bylaws, provincial acts and regulations of any plan review or inspections that may or may not be carried out by the Town of Davidson or its authorized representative.

Applicant Signature: \_\_\_\_\_ Town Representative: \_\_\_\_\_

Date: \_\_\_\_\_ Fee Collected: \_\_\_\_\_ Business License No.: \_\_\_\_\_

Please return completed form to: Town of Davidson, Box 340, Davidson, SK S0G 1A0  
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As part of the Town of Davidson's commitment to assist its existing business base, the Town will be redesigning the current online business directory found on the Town's website. The new directory will feature more in-depth information about each business, along with the opportunity to showcase company logos and pictures that best depict our business community.

**Online Directory Information** (Please print)

Applicant Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

**Company Logo and Digital Photos**

Please email your **company logo**, along with a maximum of **two digital photos** that best represent your company in .jpeg format to townofdavidson@sasktel.net.

I/We authorize the Town of Davidson to use our company logo and digital pictures on the Town of Davidson website for the purpose of promoting the Davidson business community.  YES  NO

**Business Description (maximum 250 words)**

*Please tell us about your business, how long you've operated in Davidson, what products/services you provide and any other pertinent information that potential customers, residents or developers should know about your business.*

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