



Township of Essa
**SUPPLEMENTAL RECREATIONAL FACILITIES & PUBLIC AMUSEMENT EVENT
 APPLICATION FORM**

Registered Name of Business: _____

Applicant Name: _____

Telephone: () _____

Cell: () _____

Fax: () _____

Email: _____

Website: _____

Operating Address: _____

Street

Town

Postal Code

Hours of Operation

Start:

End:

Is this a seasonal operation?

Yes No

If yes, please specify: _____

Professional affiliations of operator: _____

Will items be available for sale?

Yes No

If yes, please specify: _____

Owner Information *If not the applicant*

Name of Property Owner _____

Mailing Address _____

Telephone: () _____

Cell: () _____

Attachments to be provided with the application:

- Planning and Development Approval
- Essa Fire Department Approval
- Nottawasaga Valley Conservation Authority Letter of Compliance
- Approval from the Health Unit
- Current site plan (if this is a renewal, please indicate all changes that have occurred on site)
- If the premises is licensed under the L.L.B.O please provide copy of license.

I, _____, of the _____ of _____, do hereby confirm that I am aware of and accept the conditions set out with respect to the issuance of this license and agree to the terms of the license and of By-law 2010-20, of the Township of Essa, concerning the business licensed herewith. I further hereby indemnify and save harmless the Township of Essa, its Committees and employees, for any and all claims arising out of the business activity authorized by this license.

Dated this _____ day of _____, _____.

 Signature of Applicant

 Issuer of Licenses

 Signature of Property Owner