

LEQ'Á:MEL LANDS DEPARTMENT BUSINESS PERMIT APPLICATION



RECEIPT#

41290 Lougheed Highway, Deroche BC, VOM 1G0 PH: 604.289.2002 Fax: 604.289.2600 Email: landsclerk@legamel.ca

APPLICATION FOR BUSINESS PERMIT COMMERCIAL/INDUSTRIAL

New Application Change of Owner Renewal Change of Name Change of Address Change of Address Change of Address Incorporation # Business Address Postal Code: Mailing Address Postal Code: Name of Business Owner Business Phone # Fax #: Home Phone # Cell #: Home Address of Business Owner Email: Type of Business Gross Floor Area (m2) Emergency Contact #1 Phone #: Emergency Contact #2 Phone #: Name of Building Owner Building Owner Phone # Fax #: Building Owner Emergency Contact Phone #: I hereby make application for a business permit in accordance with all of the information as above stated and: A Declare that this is true and accurate information.	Change of Name ress Postal Code:
Change of Address Legal Name of Business Incorporation # Business Address Postal Code: Mailing Address Postal Code: Name of Business Owner Business Phone # Fax #: Home Phone # Cell #: Home Address of Business Owner Type of Business Gross Floor Area (m2) Emergency Contact #1 Phone #: Emergency Contact #2 Phone #: Building Owner Phone # Fax #: Building Owner Emergency Contact Phone #: I hereby make application for a business permit in accordance with all of the information as above stated and:	Postal Code:
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stated and:	ontact Phone #:
 b) Agree to comply with, and ensure my business complies with, all relevant Laws of Leq'á:me First Nation and other applicable laws and standards; c) Understand that a business permit does not, in itself, legalize my activities and that other authorizations may be required; and d) Agree to release and indemnify Leq'á:mel First Nation against any and all claims of any kin against Leq'á:mel First Nation in relation to my business and the premises where it is carried out: 	rue and accurate information; h, and ensure my business complies with, all relevant Laws of Leq'á:mel er applicable laws and standards; usiness permit does not, in itself, legalize my activities and that other be required; and d indemnify Leq'á:mel First Nation against any and all claims of any kind
Signature Position	Position
Date PAID ST.	PAID STAMP