County of Brant
519-449-2451
Fax: 519-449-2454
1-888-250-2297
www.brant.ca

County Administrative Building
26 Park Ave
P.O. Box 160
Burford ON, N0E 1A0

PEDDLER LICENSE APPLICATION FORM
CRAFT/TRADE SHOW

Completion Instructions

1. Complete all sections of application and enclose a cheque, payable to the County of Brant.

Attach to completed application form:
- *zoning certificate verifying that the proposed location does not contravene the County Zoning By-law*
- *letter of consent from property owner.*
- *if selling from municipal property copy of Council's approval and liability insurance.*
- *list of vendors participating in this craft/trade show and details of goods being peddled.*

2. Return your completed application to the Burford Office, by attending in person.

If you fill out this document electronically, please print out the form, sign it, and deliver a hard copy of the signed form to the Burford office.

If you require any further information please contact the licencing officer at 519-449-2451 or 1-888-250-2295 ext 2219

Fees: ☐ Specific Location Sale ($55.00 per wk/ $155.00 per month)

Type of Business: ☐ Sole Proprietorship ☐ Partnership ☐ Corporation ☐ N/A

Event Organizer (name of group):		**Name of Event:**	
Contact Person:		**Event Location:**	
Phone Number:	**Email Address:**	**Municipality:**	**Postal Code:**
Mailing Address:		**Date of Event:**	
Municipality:	**Postal Code:**	**Duration of Event:**	

Applicant's Certification

I hereby verify that the above information is complete and accurate and that I have the power to bind the license applicant.

Signature: _____ **Date:** _____

Signature: _____ **Date:** _____

Personal information collected herein will be used for the purpose of licensing and by-law enforcement and will be provided to Law Enforcement personnel.
Managed in accordance with the Municipal Information and Protection of Privacy Act.

Office Use Only

Date Rec'd: _____ **Amt:** _____ **Rec'd By:** _____

Business Registration Documents Attached ☐ Yes ☐ No

Zoning Certificate Attached: ☐ Yes ☐ No ☐ N/A

Zoning Status: _____

Property Owner's Consent attached ☐ Yes ☐ No ☐ N/A

Municipal Property ☐ Yes ☐ No

If Yes, Liability Insurance Attached ☐ Yes ☐ No

If Yes, Council Approval ☐ Yes ☐ No Date Approved: _____

Police Clearance Attached ☐ Yes ☐ No

Photos Attached ☐ Yes ☐ No

Product Description Complete ☐ Yes ☐ No

License: ☐ Approved ☐ Denied **Council Date:** _____

License # _____ **Issued By:** _____