



Customer Service Centre  
Direct Line: (705) 474-0400  
Email: [customerservicelicensing@northbay.ca](mailto:customerservicelicensing@northbay.ca)

## **RENEWAL** Application for Firearms Repair Facility Licence City of North Bay Business Licensing By-Law 2012-225 Schedule "E"

### **Business Information**

### **Owner Information**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Operating As (If Applicable)

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/Town

\_\_\_\_\_  
Province

\_\_\_\_\_  
Postal Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/Town

\_\_\_\_\_  
Province

\_\_\_\_\_  
Postal Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email Address

### **Please Attach All Appropriate Documentation**

Application Fee - <b>\$50.00</b> per year	
Copy of Articles of Incorporation or Master Business Licence (If Applicable)	

I/We hereby agree and understand the terms and conditions set out in By-Law 2012-225 and any amending By-Laws and will comply therewith and I understand that any non-compliance will result in the revoking of my licence without refund.

The undersigned hereby certifies that the statements herein contained in the said application are true and made with a full knowledge of the circumstances connected with the same.

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_