



Application for Multiple Family Dwelling

for Address of Premises: _____

I (WE): _____
(Owner of Building/Applicant – sole proprietor, partnership or corporation)

of: _____
(Mailing Address) (Postal Code)

Telephone Number(s): (Home) _____ (Work/Cell) _____ (Fax) _____

E-mail Address: _____

Business Number (assigned by Canada Revenue Agency): _____

hereby apply for a license to operate the above **Multiple Family Dwelling** to commence on the _____ day of _____, 20_____.

I (We) hereby certify the information provided in this application to be correct and, acknowledge that any false statement made upon this application may result in the revocation of my (our) license and/or prosecution:

1. Owner of building: _____

Resides on site: (choose one) **Yes** **No**

Management company and/or caretaker: _____

Address: _____

Contact Number(s): (Home) _____ (Work/Cell) _____ (Fax) _____

2. Description of premises:

No. of storeys: (choose one) **1** **2** **3** **Basement:** (choose one) **Yes** **No**

	TOTAL No. of Units per Floor	No. of Rental Units that:	
		Are Self-contained	SHARE kitchen and/or bathroom facilities
Basement			
Main Floor			
Second Floor			
Third Floor			
TOTAL			

THIS IS NOT A LICENSE – the fee must be paid in full and have all required approvals before the license is issued.

Date: _____

Signature of Applicant: _____

Revised August 2019