



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 (if applicable)
- Certificate of insurance for a minimum of \$3 million dollars showing Township as "additionally insured"
- 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.



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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