



ᐱᓄᓚᐱᑦ ᑭᑦᐱᓄ
FOR OFFICE USE ONLY
 ᓄᓕᑦᑲᓄᓚᑦ
 Receipt # _____
 ᐱᑦᑲᑦᑲᓄᓚᓄ
 Amount \$ _____

ᓄᓕᑦᑲᓄᓚᓄ ᐱᓄᓚᐱᑦ ᐱᓄᓚᑭᑦ
BUSINESS LICENCE APPLICATION

ᓄᓕᑦᑲ ᓄᓕᑦᑲᑭᑦᑲᓄᓚᓄ
NEW RENEWAL

ᐅᓄᓄᓄ

Date _____ ᐅᓄᓄ ᐱᓄᓚᑭᑦ ᐱᓄᓚᑭᑦᑲᓄᓚᓄ ᐅᓄᓄ
 This application is made on behalf of:

ᓄᑦᑲᓄᓚᑦ ᐱᑦᑲᓄᓄ
 Name of Business

ᑭᑦᑲᓄᓚᑦᐱᓄᓄ ᓄᓄᓄᓄ
 Whose address is: _____

ᐅᓄᓄᓄᑲᓄᓄ ᓄᓄᓄᓄ ᓄᓄᓄᓄᓄᓄ ᓄᓄᓄᓄᓄᓄ ᓄᓄᓄᓄᓄᓄ
 Telephone No: _____ Fax No: _____ ᓄᓄᓄᓄᓄᓄᓄ
 ᓄᓄᓄᓄᓄᓄ
 E-mail address: _____

ᐱᓄᓄᓄᑲᓄᓄᓄ ᓄᑦᑲᓄᓚᓄ ᐱᓄᓄᓄᓄ ᓄᓄᓄᓄ ᐱᓄᓄᓄᓄᓄᓄᓄ
 For license under the provisions of the *Business Licence Act* for the purpose of carrying
 on the business of: _____

ᐅᓄᓄ ᓄᓄᓄᓄᓄ ᐅᓄᓄ ᐱᓄᓄᓄᓄ ᐱᓄᓄᓄᓄᓄᓄ ᓄᓄ 31, 20 ____ . at
 _____, Nunavut/ during the fiscal year ending March 31, 20 ____.

ᐱᓄᓄᓄᑲᓄᓄᓄᓄ ᓄᓄᓄᓄᓄ ᐱᓄᓄᓄᓄᓄᓄᓄᓄᓄᓄᓄᓄ
ATTACH A COPY OF A VALID NUNAVUT/NORTHWEST TERRITORIES WORKERS
ᐱᓄᓄᓄᓄᓄᓄᓄᓄᓄᓄ ᓄᓄᓄᓄᓄᓄᓄ ᓄᓄᓄᓄᓄᓄᓄᓄᓄᓄ
COMPENSATION CERTIFICATE OF COMPLIANCE.

ᐅᓄᓄᓄ ᐱᓄᓄᓄᓄᓄᓄ
 FORWARD APPLICATION TO:
 The Registrar
 Business Licensing

ᑭᑦᑲᓄᓄᓄ ᐱᑦᑲᓄᓄ ᐱᓄᓄᓄᓄᓄᓄ
 Print name of applicant

Consumer Affairs
Community and Government
Services
Government of Nunavut
P.O. Box 440
Baker Lake, NU
X0C 0A0

ᐅᓂᓐ ᐱᑎᓕᐅᓐᓂᑦ
Signature of Applicant

ᑭᓕᓂᐅᓂᑦ Position