



Application for Adult Video Store Licence

Pursuant to By-law 5828/01, as amended

Complete this application and submit it to the Clerk's Division along with the appropriate fee and necessary attachments. A minimum of one (1) week is required to process this application following receipt of all the necessary documentation.

Licence #

Applicant

Name			Telephone
Address	City	Province	Postal Code

Licencee

Name			Telephone
Address	City	Province	Postal Code

Owner of Building / Premises (in which any such business is to be carried on)

Name			Telephone
Address	City	Province	Postal Code

Business Details

Trade or Business Description:

Application Type

- New Business
 Existing Business – Change of Ownership
 Existing Business - Renewal

Attachments

- | | |
|--|--|
| <input type="checkbox"/> Copy of Incorporating Documents & last annual information filed (for corporate applicants only) | <input type="checkbox"/> Statutory declaration as per Section 7(g) of By-law 5828/01 (page 2 of this application) |
| <input type="checkbox"/> If Partnership, names and home addresses of partners and copy of registered declaration of Partnership. | <input type="checkbox"/> Adult Video Store Licence Fee (\$1,500.00) Make Cheque / Money Order payable to the City of Pickering |
| <input type="checkbox"/> If Registered Partnership, copy of Registered Declaration of Partnership | <input type="checkbox"/> Copy & measurements of floor area of display of video tapes and of adult video tapes |
| <input type="checkbox"/> List of names & addresses of directors, shareholders & officers of Corporation and any corporation having an interest (direct or indirect) in the Adult Video Tape Store. | |

Declaration

I hereby certify that the information provided in this application is true, correct and complete to the best of my knowledge and belief. (The making of false or deceptive statements herein may result in the non-issuance or cancellation of the Licence for which you have applied.) *(Affix Corporate Seal over applicant signature if Corporate Applicant.)*

Date	Fee	Receipt #
Applicant's Name	Position	Signature

For office Use only

Decision	Clerk's Division	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	Date	By
	Council	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	Date	Resolution #

Complete the appropriate Statutory Declaration.

Statutory Declaration – Partnership / Sole Proprietor

IN THE MATTER OF _____ LOCATED AT _____
(Name of Video Store)

I, _____ DO SOLEMNLY DECLARE:

1. That I/We, _____
(Sole Proprietor or Partner)

and have knowledge of the facts herein deposed to.

2. To the best of my knowledge and belief no partners or any party having a direct or indirect interest of the business have ever been convicted under any By-law, Provincial or Federal Statute.

AND I MAKE THIS SOLEMN DECLARATION conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

SEVERALLY DECLARED before me at)
The City of Pickering in the Regional)
Municipality of Durham) _____
)
This _____ day of _____, _____) _____

Statutory Declaration – Corporation

IN THE MATTER OF _____ LOCATED AT _____
(Name of Video Store)

I, _____ DO SOLEMNLY DECLARE:

2. That I am the president / vice president of; _____

and have knowledge of the facts herein deposed to.

2. To the best of my knowledge and belief no directors, shareholders or officers of this Corporation have ever been convicted under any By-law, Provincial or Federal Statute.

AND I MAKE THIS SOLEMN DECLARATION conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

SEVERALLY DECLARED before me at)
The City of Pickering in the Regional)
Municipality of Durham) _____
)
This _____ day of _____, _____) _____