The Corporation of the
Town of Fort Erie

1 Municipal Centre Drive
Fort Erie, ON L2A 2S6
Web: town.forterie.ca

Phone: 905-871-1600
Fax: 905-871- 9194
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APPLICATION FOR BED & BREAKFAST SCHEDULE "4" TO BY-LAW NO. 217-05

BUSINESS INFORMATION		O NEW O RENEWAL
NAME OF BUSINESS:		
Address:		
Postal Code:	Phone:	Fax:

APPLICANT INFORMATION		
NAME OF APPLICANT:		
Address:		
Postal Code:	Phone:	Fax:
NAME OF OPERATOR: (if difference from applicant)		
Address:		
Postal Code:	Phone:	Fax:

DWELLING INFORMATION		
Number of Bedrooms Applied For (maximum of three):		
Name, Number or Physical Description of Each Room: (IE: above or below the grade, ground floor, over garage, Victoria Room, Red Room, etc)		
#1.		
#2.		
#3.		
Total Number of Guests to be Accommodated (maximum of eight):		
Swimming Pool:	□ Yes	□ No

SUPPORTING DOCUMENTATION

The following notices of compliance pursuant to Schedule "4" of By-law No. 217-05 are attached hereto.
I further acknowledge that I have retained/received copies of said compliances for my records:

□ Ontario Fire Code
□ Health Protection & Promotion Act
□ Ontario Electrical Safety Code
□ Building/Plumbing Code Act
□ Zoning By-law

I, We hereby apply for the following licence and agree to observe and comply with all regulations pursuant to By-law No. 217-05 and any amendments thereto, which pertain to the licence for which I/We have made an application.

Signature of Applicant Print Name of Applicant Date

PERSONAL INFORMATION CONTAINED ON THIS FORM IS COLLECTED UNDER THE AUTHORITY OF THE *MUNICIPAL ACT, 2001* AND WILL BE USED IN THE ADMINISTRATION OF THE ABOVE NOTED BY-LAW AND COPIED TO THE ECONOMIC DEVELOPMENT AND TOURISM CORPORATION AND THE GREATER FORT ERIE CHAMBER OF COMMERCE