

Transient Trader Event Licence Application

Name of Applicant:	Home Phone #: ()
Home Address:	
	Postal Code:
Vendor Business Name:	
Event Name:	
Event Location:	
Event Date:	
Description of Goods/Services:	
	with the fees By-Law; and
Other documents deemed pertinent in gran	ting this application can be requested by the Licensing Officer.
I, the undersigned, agree that I shall at all times indemni Members of Council from and against any and all manner	EMNIFICATION AGREEMENT Ify and save harmless the Corporation of the City of Kawartha Lakes, its employees and or of claims, demands, losses, actions and other proceedings whatsoever made or brought of any loss, damage or injury to any person or property, which are occasioned by or the business.
X	
Signature of Applicant	Date of Signature
adhere to all relevant by-laws, rules and regulations, ma applicable federal or provincial legislation or regulation	DECLARATION on provided in and with this application is factual and correct and agree to abide by and atters and things as are, or may be enacted by the City of Kawartha Lakes, and to any in effect, enacted, or amended, from time to time, and make this solemn declaration effect as if made under oath. I also hereby agree to authorise the City of Kawartha Lakes the granting of this application.
XSignature of Applicant	Data of Signature
	Date of Signature bursuant to the <i>Municipal Freedom of Information and Protection of Privacy Act</i> and the
	s application. Questions about this collection should be directed to the City Clerk or

Municipal Law & Licensing Clerk, City of Kawartha Lakes, 37 Lindsay, St. South Lindsay, Phone: (705) 324-9411 ext. 1328