

# CONNECT → ENGAGE → PROMOTE Your Business BUSINESS REGISTRATION PROGRAM



Portions of the following business information may be made available publicly and used as a resource by the County of Vermilion River (CVR) and published on the County website at [www.vermilion-river.com](http://www.vermilion-river.com). The County of Vermilion River (CVR) cannot guarantee how this information may be used thereafter. It is the responsibility of the business to provide updated information to CVR. If you **do not wish** to have your business information posted publicly, please read the following statement and check the box. I **do NOT wish** to have my business information posted on CVR's online Business Directory

## APPLICANT INFORMATION

<b>Business Name:</b>		<b>Numbered Company</b> (if applicable):	
Contact Person:	Business Phone:	Business Owner (if different from Contact):	
Mailing Address:		Town:	
Prov:	Postal Code:	Email:	
<b>Street Address</b> (if different from Mailing):			
<b>LEGAL ADDRESS:</b> (circle one) NE NW SE SW _____ W4 LOT____ BLOCK____ PLAN_____			

## BUSINESS OVERVIEW

<b>Business Sector your business is in(circle one):</b>		
Accommodation, Food & Beverage	Agriculture or related industries	
Business/Personal/Other services	Communication/Utilities	
Construction	Education	
Finance, Insurance, Real Estate	Fishing/Trapping	
Forestry	Government & Public Administration	
Health & Social Services	Mining, Quarrying, Oil & Gas Extraction	
Non-Petro-Chemical Manufacturing	Oil/Gas and Petro-Chemical Manufacturing	
Transportation	Wholesale/Retail Trade	
Other industry: _____		
<b>Year Established in County:</b>	<b>ISO Certified?</b> YES NO	<b>Is your business located in your home?</b> YES NO

**Detailed Description of Business** (services or programs provided, products sold or manufactured, items repaired, include brand names where possible, are you an independent business or part of a larger corporation etc):

<b>Number of FULL TIME Employees:</b>	<b>Number of PART TIME Employees:</b>	<b>Are you the landowner of the business location?</b> YES NO
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**Markets that your business serves** (circle all that apply):

Vermilion/ Lloydminster	East Central Alberta	Northern Alberta	Alberta	Saskatchewan
Western Canada	Eastern Canada	USA	Central & South America	Europe
Africa	Asia	Australia	Worldwide	Other Specific: _____

How many clients/customers visit your business during an average  
 DAY \_\_\_\_\_ WEEK \_\_\_\_\_

**PROFILE INFORMATION for Online Directory**

<b>Website:</b>	<b>Do you have an online store?</b> YES NO
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**Social Media Feeds** you use and your links:  
 Facebook \_\_\_\_\_ Instagram @ \_\_\_\_\_  
 Twitter @ \_\_\_\_\_ # \_\_\_\_\_  
 LinkedIn \_\_\_\_\_ YouTube Channel \_\_\_\_\_  
 Other:

<b>Hours of Operation:</b>	<b>Is your business seasonal?</b> SPRING SUMMER FALL WINTER What are the general dates of operation?
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**Driving Directions** (if easier for customers to find you):

Would you like someone from Economic Development to follow up with you? YES NO	Would you like to be on the CVR email list (for events, business information, newsletters etc.) YES NO
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## CONFIDENTIAL INFORMATION

The following information will be used only by CVR and will not be made available to the public. It will be used for statistics, internal program development, and promoting growth opportunities. Responses are voluntary.

**Do you have future plans for expansion?**  
YES NO If YES, will this be within current location or a second location?

**Do you have future plans for relocation?**  
YES NO If yes, will this be within the County or outside the County?

**Estimated Annual Sales:** \$

**Over the past 3 years, have your annual sales:**  
Increased      Remained Stable      Decreased

**In case of Emergency/Disaster:** Please list those people that have 24 hour authorized access to your business location. This information will only be used in cases of emergency or disaster and shared with our responders.

**Contact #1:** \_\_\_\_\_ Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_

Keyholder YES NO Alarm Password YES NO

**Contact #2:** \_\_\_\_\_ Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_

Keyholder YES NO Alarm Password YES NO

**Are any Dangerous Goods or Chemicals stored at your business location?** YES NO

If Yes, please list: \_\_\_\_\_

If Yes, Have you submitted a Fire Pre-Plan to the County? Contact the Protective Services department to complete yours today.

## SIGNATURES

This is to certify that the below named person has read, understands and agrees to the information and criteria outlined on this form

Name of applicant (please print):

Date:

Signature of applicant:

**PLEASE RETURN COMPLETED FORM** to the CVR **Office Box 69 4912 50 Ave Kitscoty, AB T0B 2P0** by **FAX: (780) 846-2716** or **EMAIL to cmcgirr@county24.com**

The business owner is responsible for obtaining from the appropriate municipal, provincial and federal authority, any required licensing for your business operations (<http://bizpal.ca/en/> is the BizPal site that can guide you to those requirements), as well as any permits relating to building, plumbing, gas, sewer, water, electricity, highways, signage, fencing and all other permits required in connection with any new development.

The personal information requested on this form is being collected by the County of Vermilion River for purposes provided under Section 33 of the Freedom of Information and Protection of Privacy (FOIP) Act and is protected by the FOIP Act. The information collected is required for the purpose of carrying out an operating program or activity of the County, in particular for the purpose of our Economic Development program. If you have any questions about this collection, contact the County Administrator at (780)846-2244 or (780)853-5492.