



TOWN OF VIRDEN BUSINESS LICENSE APPLICATION

Business Name

Contact Person

Position

Phone Number Fax:

Email Address

Civic Address

Mailing Address

City/Town Province Postal Code

Type of Business

Business Based: Virden
 Wallace-Woodworth, Pipestone, Sifton/Oak Lake, Elkhorn
 Other

Social Media Information (Optional):

Website

Facebook

Twitter

Instagram

Name (printed)

Signature

Date

Please forward the completed and signed form to clerk@virden.ca.