TOWN OF LUSELAND
BYLAW NO. 2026-07

SCHEDULE "B"

Town of Luseland
Business License Application
**In Accordance with Business License Bylaw No. 2026-07

Return To:
Town of Luseland
PO Box 130
503 Grand Ave
Luseland, SK S0L 2A0

For Inquires Contact:
Town of Luseland
1-306-372-4218
luseland@sasktel.net
luselandclerk@sasktel.net

BUSINESS INFORMATION

Business Name:	Contact Name:	
Business Civic Address:	City:	Postal Code
Phone:	Cell:	Email
Applicant's interest in property: **Circle Applicable	Owner Legal Representative	Tenant Option to Purchase
Mailing Address:	City:	Postal Code:

***To be completed if the applicant is different from the landowner:

LANDOWNER INFORMATION

Contact name:	Company Name:	
Address:	City:	Postal Code:
Phone:	Cell:	Email:
Signature		Date

- I hereby declare that all the information contained in this application is true to the best of my knowledge.
- I acknowledge that this Business needs to be registered in the Town of Luseland.
- I acknowledge that issuance of a Business License does not relieve the owner or applicant from complying with all Town Bylaws and/or Provincial or Federal regulations.
- I acknowledge that a business license will not be issued if a Development Permit is not first approved where required. Fees for Business Licenses are payable upon issuance of a Development Permit where applicable.
- Operating a Business without a Business License is at your own risk and may be subject to enforcement measures under the Business License Bylaw No 2026-07.

I consent to sharing the information on this application with the Town of Luseland and the Luseland & District Chamber of Commerce for the purpose of sharing information with the Business Owner and/or Landowner on Economic Development initiatives.

Applicant Signature: _____ Date: _____

CAO Initials

Mayor Initials

SITE INFORMATION

Area of Building to be used for this specified business: _____

_____

Check the Business Type that best suits your operation:
***For more info, please see Schedule "B" of Bylaw No 2026-07

Seasonal Trades		Crafts	
Contractor		Direct Sales	
Professional Service		Personal Services	
Basic Home Based Business		Specialized Transportation	
Basic Business		Transient Traders	
Unclassified		Food Services	

BUSINESS DESCRIPTION

Please Provide a brief description of your Business:

Mobile Concessions:
It is required to complete the Mobile Concession location form. Please attach.

DIRECT SELLERS LICENSE: (If applying for category 7 and is Licensed under *The Direct Sellers Act)*

_____

OFFICE USE ONLY

Roll #:	Development Permit Fee: Yes No	$_____
	Development Permit: Yes No	Permit No: _____
	Building Permit: Yes No	Permit No: _____
Mobile Concession:	Notify Public Health: Yes No	Date: _____
Referrals:	_____	_____
Business License Fee:		

Signature of Approval: _____
(CAO or Assistant Administrator)

CAO Initials

Mayor Initials

TOWN OF LUSELAND
BYLAW NO. 2026-07

SCHEDULE "C"

Town of Luseland
Mobile Concession Information
**In Accordance with Business License Bylaw No. 2026-07

Return To:
Town of Luseland
PO Box 130
503 Grand Ave
Luseland, SK S0L 2A0

For Inquires Contact:
Town of Luseland
1-306-372-4218
luseland@sasktel.net
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Mobile Concessions are subject to the following requirements. Please review Business Bylaw No 2026-07 for a complete list of operating requirements.

Mobile Concessions: Food Carts and Food Trucks: (Primary Requirements)

- Not permitted on a public roadway other than a special event, or prior approval from the Council of the Town of Luseland
- May operate from 8:00 a.m. to 9:00 p.m. daily
- May operate at a residence, recreational area, industrial area, or urban service area for 2 hours per day (i.e. at a birthday party, industrial site event, city park parking lot etc.)
- Longer operating times may be approved by Council upon request
- Mobile concessions shall not be located closer than 20 m from the entrance or outer wall of a restaurant without consent of the restaurant owner.
- A minimum of 1.2 meters of sidewalk shall be free of obstructions to allow pedestrian travel around the food cart.

MOBILE CONCESSION LOCATION

I have permission to locate my mobile concession on the following private properties;

Civic Address: _____ Owner Name: _____

Owner Phone Number: _____

Civic Address: _____ Owner Name: _____

Owner Phone Number: _____

Civic Address: _____ Owner Name: _____

Owner Phone Number: _____

Civic Address: _____ Owner Name: _____

Owner Phone Number: _____

CAO Initials

Mayor Initials