

**SCHEDULE "A"**

TO: Office of the Chief Administrative Officer      DATE: \_\_\_\_\_  
Town of Mayerthorpe  
P.O. Box 420  
4911 - 52 Street  
Mayerthorpe, Alberta T0E 1N0

RE: **APPLICATION FOR HAWKERS OR PEDDLERS' LICENSE**

Name and Address of Applicant:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

Goods or Services being offered for sale:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

License Duration:

From: \_\_\_\_\_ To: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

FOR MUNICIPAL OFFICE USE ONLY

APPLICATION NO. \_\_\_\_\_

COMMENTS: \_\_\_\_\_

FEE: \_\_\_\_\_

\_\_\_\_\_  
RECEIPT NO. \_\_\_\_\_

\_\_\_\_\_  
LICENSE NO. \_\_\_\_\_

\_\_\_\_\_  
Municipal Receptionist

cc: Mayerthorpe Chamber of Commerce