



THE CORPORATION OF THE TOWN OF OAKVILLE  
 1225 Trafalgar Road  
 Oakville Ontario, L6H 0H3  
 Telephone: 905-845-6601 Fax: 905-815-6077

**2018 APPLICATION TO PERMIT THE USE OF ANIMALS FOR ENTERTAINMENT**

**FEE: \$293.00** (non-refundable, non-transferable)

The following must be fully completed and submitted along with all required documents and the applicable fee.

Applications may be submitted as follows:

- In Person at ServiceOakville, 1225 Trafalgar Road;
- By Mail to: Enforcement Services, Town of Oakville, 1225 Trafalgar Road, Oakville, ON L6H 0H3

**BUSINESS:**

NAME: \_\_\_\_\_

BUSINESS OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ UNIT: \_\_\_\_\_ CITY/TOWN: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CORPORATE NUMBER: \_\_\_\_\_ Sole Proprietor: \_\_\_\_\_ Partnership: \_\_\_\_\_

**APPLICANT:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ UNIT: \_\_\_\_\_ CITY/TOWN: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**The following documents must be included with this application.**

- If a corporation, provide a copy of the incorporating documents and corporate number.
- If partnership, provide list of names, date of birth and address of each partner.
- A certificate of Occupancy obtained from Building Services. Contact [zoningrequests@oakville.ca](mailto:zoningrequests@oakville.ca) (if applicable)
- Certificate of Public Liability Insurance in the amount of two million dollars (\$2,000,000). The Town of Oakville and address **must** appear on the certificate as either "**Additional Insured**" or "**Certificate Holder**" in order to provide the Town at least ten days' notice in writing prior to cancellation, expiration or change of policy.
- An original Canadian Criminal Record Check issued by an accredited Canadian Police Service, no more than 30-days old at the time of the licence application.
- A description of the proposed entertainment and the animals being used for the purpose of entertainment.
- On a separate sheet, provide a list of each event, location(s), date(s) and time(s), if applicable.
- Complete a Declaration that no convictions have been registered against the applicant, the company, employees or volunteers under the OSPCA; Dog Owner Liability Act R.S.O. 1990, c. D.16; (as amended) or the Criminal Code of Canada, R.S. 1985, C. C-46 (as amended), or any other statute in Canada.

Please be advised:

- Incomplete applications will not be accepted and will be returned.
- It is an offence to operate a business without a licence and charges may be laid without additional notice.

**I hereby declare that I will comply with the provisions of all by-laws pertaining to the licence for which I am applying.**

\_\_\_\_\_  
Signature Date

**ENFORCEMENT USE ONLY:** Total Fee: \_\_\_\_\_ Receipt No: \_\_\_\_\_ Zoning: \_\_\_\_\_ Licence No. \_\_\_\_\_

Insurance: \_\_\_\_\_ Declaration: \_\_\_\_\_ Corp. Docs: \_\_\_\_\_ Police Check: \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Note: Personal information on this form is collected under the authority of the *Municipal Act* and the Town of Oakville Licensing By-law and will be used for business licensing and regulating. Questions about this collection should be directed to Municipal Enforcement Services, 1225 Trafalgar Road, Oakville, Ontario, L6H 0H3, telephone, 905-845-6601

# Statutory Declaration

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**IN THE MATTER OF Application for an Animals for Entertainment Licence**

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To Wit: I,

of the \_\_\_\_\_ of \_\_\_\_\_

in the \_\_\_\_\_ of \_\_\_\_\_

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**SOLEMNLY DECLARE, THAT**

There have been no convictions registered against me, the company, employees or volunteer's under the OSPCA; Dog Owner Liability Act R.S.O. 1990, c. D.16; as amended, or the Criminal Code of Canada, R.S. 1985, C. C-46, as amended, or any other statute in Canada.

**And I make this solemn Declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.**

Signature of Declarant

DECLARED before me at the \_\_\_\_\_ of \_\_\_\_\_,

in the \_\_\_\_\_ of \_\_\_\_\_, Province of \_\_\_\_\_,

this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

*Declaration must be signed and stamped by A Commissioner for taking affidavits or Notary Public.*