



OAKVILLE

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

2019 APPLICATION TO LICENCE ARBORIST CONSULTING, ARBORICULTURE AND LANDSCAPING/TREE COMPANIES

FEE: The fee is non-refundable and non-transferable

Class A – Arborist Consulting Company	\$340.00
Class B – Arboriculture Company	\$464.00
Class C – Tree Company	\$464.00
Class D – Landscaping/Tree Company	\$551.00

Applications **MUST** be **FULLY COMPLETED** and **SUBMITTED** along with any required documents and the applicable fee.

Applications may be submitted as follows:

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

BUSINESS: Note: For a business address, P.O.Box number will not be accepted.

NAME: _____

ADDRESS: _____ UNIT: _____ CITY/TOWN: _____

POSTAL CODE: _____ TELEPHONE: _____

EMAIL ADDRESS: _____

CORPORATE NUMBER: _____ Sole Prop: _____ Partnership: _____

APPLICANT:

NAME: _____

ADDRESS: _____ UNIT: _____ CITY/TOWN: _____

POSTAL CODE: _____ TELEPHONE: _____

EMAIL ADDRESS: _____

The following documents listed for each licence class must be filed with this application.

• Class A: Arborist Consulting Company

- If other than a sole proprietorship, a copy of the incorporating documents and corporate number.
- If partnership, provide a list of names, date of birth and address of each partner.
- Certificate of Errors and Omissions Insurance in the amount of two million dollars (\$2,000,000). The Town of Oakville and address **must** appear on the certificate as "**Certificate Holder**" or "Additional Insured" in order to provide the Town at least thirty (30) days' notice in writing prior to cancellation, expiration or change of policy.
- 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.
- List of employee(s) and copy of valid qualifications
- Original Canadian Criminal Reference Check issued by an accredited Canadian Police Service, no more than 30 days old at the time of the licence application.

OFFICE USE ONLY: Class 'A'

Total Fees: _____ Receipt No. _____ Licence. _____ Date Issued: _____

Corp. Doc. _____ Insurance: _____ Errors Omissions: _____ Police Check _____ Employee List: _____

• Class B: Arboriculture Company

- If other than a sole proprietorship, a copy of the incorporating documents and corporate number.
- If partnership, provide a list of names, date of birth and address of each partner.
- Certificate of Errors and Omissions Insurance in the amount of two million dollars (\$2,000,000). The Town of Oakville and address **must** appear on the certificate as “**Certificate Holder**” in order to provide the Town at least thirty (30) days’ notice in writing prior to cancellation, expiration or change of policy.
- 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.
- List of employee(s) and copy of valid qualifications for each of the following:
 - Arborist
 - Certified Tree Worker Climber Specialist
 - Certified Chainsaw Operator
 - Utility Arborist
- Original Canadian Criminal Reference Check issued by an accredited Canadian Police Service, no more than 30 days old at the time of the licence application.

OFFICE USE ONLY: Class ‘B’

Total Fees: _____ Receipt No. _____ Licence. _____ Date Issued: _____
 Corp. Doc. ____ Insurance: ____ Errors Omissions: ____ Police Check ____ Arborist: ____ Tree Worker: ____
 Chainsaw Operator: ____ Utility Arborist: ____

• Class C: Tree Company

- If other than a sole proprietorship, a copy of the incorporating documents and corporate number.
- If partnership, provide a list of names, date of birth and address of each partner.
- 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.
- List of employee(s) and copy of valid qualifications for each of the following:
 - Certified Tree Worker Climber Specialist
 - Certified Chainsaw Operator
 - Utility Arborist, if required
- Original Canadian Criminal Reference Check issued by an accredited Canadian Police Service, no more than 30 days old at the time of the licence application.

OFFICE USE ONLY: Class ‘C’

Total Fees: _____ Receipt No. _____ Licence. _____ Date Issued: _____
 Corp. Doc. ____ Insurance: ____ Errors Omissions: ____ Police Check: ____ Tree Worker: ____ Chainsaw Operator: ____
 Utility Arborist: ____

• Class D: Landscaping / Tree Company

- If other than a sole proprietorship, a copy of the incorporating documents and corporate number.
- If partnership, provide a list of names, date of birth and address of each partner.
- 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.
- Original Canadian Criminal Reference Check issued by an accredited Canadian Police Service, no more than 30 days old at the time of the licence application.
- List of employee(s) and copy of valid qualifications for each of the following:
 - Certified Tree Worker Climber Specialist
 - Certified Chainsaw Operator
 - Utility Arborist, if required

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OFFICE USE ONLY:

Class ‘D’

Total Fees: _____ Receipt No. _____ Licence. _____ Date Issued: _____

Corp. Doc. ____ Insurance: ____ Errors Omissions: ____ Police Check: ____ Tree Worker: ____ Chainsaw Operator: ____

Utility Arborist: ____

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.
- Licenses are issued with an expiry date. It is the responsibility of the licensee to renew their licence prior to the expiry date.
- Any renewals received after the expiry date will be subject to a \$50 late fee.

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

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 regulation. Questions about this collection should be directed to Municipal Enforcement Services, 1225 Trafalgar Road, Oakville, Ontario, L6H 0H3, telephone, 905-845-6601.