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Vapour Product Retailer (B59) Operating Information Questionnaire

1. Are you registered or will be registered with Toronto Public Health as a Specialty Vape Store (*registration with Toronto Public Health is required if you sell more than 85% vape*)?



O No

- 2. Do you sell cigars, cigarettes, or tobacco?
 - O Yes
 - O No
- 3. Do you sell foodstuffs? (Foodstuffs are prepacked food and drinks. For example chips, pop etc.)
 - O Yes
 - O No
- 4. What is the square footage of your business premises?

5. How many parking spaces do you have designated to your business? (*Please note that street parking or shared parking does not apply to this question*)

Date:

Client Name:

Client Signature: