

Building Renovator (T85) Operating Information Questionnaire

1. Please indicate whether the address of your business is:

- A mailing address only** (same as your residence)
- Office use** (different than residence)

If office use, then please provide the following:

- a) What is the square footage of your business premises?
- b) 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)

2. Have you been previously licensed and wish to use the same trade number?

- Yes** - please use my previous trade number associated with licence number: T85-__ _
- No** (a trade number will be system generated and applied to your new licence)

Date:

Client Name:

Client Signature: