Cape Breton Regional Municipality

By-law Enforcement
320 Esplanade
Sydney, Nova Scotia, B1P 7B9
Email: bylawinfo@cbrm.ns.ca
Phone: 902-563-5091

Application for Automatic Vending Machine Licence

First Name: _____ Last Name: _____

Mailing Address: _____

Postal Code: _____ Phone: _____

Email: _____

Company Name *(if applicable)*: _____

Location of Machine _____

Location within building: _____

Type of Automatic Vending Machine: _____

Number of Machines: _____

Serial Number of Machine: _____

_____ _____

Signature of Applicant Date

*If applicant has more than one Automatic Vending Machine in various locations, please attach a list with this completed application form.