

LAC USE ONLY
Date Application Received

Licensing Advisory Committee
Manitoba Sustainable Development
Box 38 – 200 Saulteaux Crescent
Winnipeg MB R3J 3W3



This Application is made pursuant to the provisions of ***The Resource Tourism Operators Act***

Application for Authorization to

ESTABLISH ☐

CONSTRUCT ☐

MODIFY/EXPAND ☐

MOVE ☐

PERSONAL INFORMATION (PLEASE PRINT)

Applicant (Mr / Mrs / Ms / Corporation) _____

Primary Contact (Mr / Mrs/ Ms) _____
(if applicant is Corporation)

Telephone (H) (____) _____ (W) (____) _____ Fax (____) _____

E-mail Address _____ Date of Birth _____
(Day/Month/Year)

Permanent Address _____
Street/P.O. Box City/Town Prov/State Postal/Zip Code

Mailing Address _____
(if different from above) Street/P.O. Box City/Town Prov/State Postal/Zip Code

Other Jurisdiction(s) In Which You Are Currently Providing _____
or Have Previously Provided Outfitting Service(s)

NAME AND LOCATION OF FACILITY

Name of Business _____

Registered Business Name? **(Please circle)** Yes / No If yes, Business Registration No. _____

Proposed Location of Facility _____ / _____
Latitude/Longitude Section/Township/Range

Please Specify and Circle as Appropriate _____
City / Town / Village / Municipality / Unorg'd Territory / Crown / Private / Prov Park / Nat'l Park / First Nation Reserve

Proposed Lake, _____ / _____
Legal Name Local Name

River, _____ / _____
Legal Name Local Name

or Other Water System _____ / _____
to be Used Legal Name Local Name

Attach additional sheet if required.

TYPE OF FACILITY

RESOURCE USE

Lodge ☐ ☐☐ units ☐☐ capacity

Permanent ☐

Semi-Permanent ☐

Private Residence ☐ Occupied Yes ☐ No ☐

Outcamp ☐ ☐☐ units ☐☐ capacity

Permanent ☐

Semi-Permanent ☐

Private Residence ☐ Occupied Yes ☐ No ☐

Portable Camp ☐

Tent ☐ ☐☐ units ☐☐ capacity

Trailer ☐ ☐☐ units ☐☐ capacity

Motorhome ☐ ☐☐ units ☐☐ capacity

Houseboat ☐ ☐☐ units ☐☐ capacity

Campground ☐ ☐☐☐ units ☐☐☐ capacity

Related Facility ☐

Shelter ☐ ☐☐ units _____ specify use

Cache ☐ ☐☐ boats _____ other (specify)

Angling ☐ Hunting ☐

Species	Resident	Non-Resident
Black Bear	<input type="checkbox"/>	<input type="checkbox"/>
Moose	<input type="checkbox"/>	<input type="checkbox"/>
Deer	<input type="checkbox"/>	<input type="checkbox"/>
Caribou	<input type="checkbox"/>	<input type="checkbox"/>
Elk	<input type="checkbox"/>	<input type="checkbox"/>
Game bird	<input type="checkbox"/>	<input type="checkbox"/>
Waterfowl	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>

Please specify _____

Ecotourism ☐ _____

Include details in operational plan

Game Hunting Area(s) – Specify by Species (also required for game bird and waterfowl)

Note: Depending on the type of facility being applied for, appropriate building plans approval, site plan, floor plan, and/or pictures must be provided with this application. Please refer to the *Licensing/Permitting Requirements for Outfitters* guidebook for more information.

PERIOD OF OPERATION

☐ All Year

☐ Seasonal From _____ to _____ Total Days/Year _____

Month Month

METHOD OF OPERATION

A) MANAGEMENT:

- Name of Manager (**lodge**) _____
- Name of Manager (**outcamp**) _____
(outcamps with capacity of 6 or more are required to have camp management)
- Number of Employees: Full Time _____ Part Time _____

B) SERVICES TO BE PROVIDED:

- Guide Services
- Accommodation
- Food Service
- Rentals
- Other

C) OPERATIONAL PLAN / DEVELOPMENT PLAN (where applicable): **Please provide details of your proposal on a separate sheet**

D) **EQUIPMENT:** List all equipment to be used in conjunction with your facility/service on a separate sheet

FINANCIAL DATA

Planned Total Investment for Proposed Development or Expansion

\$ _____ First Year \$ _____ Second Year \$ _____ Third Year

First Year	Second Year	Third Year
1. Value/Cost of Land \$ _____	9. How to you intend to finance?	
2. Cost of Site Improvements \$ _____	10. Name and Address of Financial Institution	
3. Cost of Buildings \$ _____		
4. Cost of Furnishings \$ _____		
5. Cost of Equipment \$ _____		
6. Total Capital Cost \$ _____	11. References	
7. Total Equity \$ _____		
8. Total Financing Required \$ _____		

DECLARATION

I (We) expressly consent to the Manitoba Government conducting a prerequisite background check for the purpose of determining my (our) eligibility for establishing, constructing, modifying, expanding or moving a resource tourism facility.

I (We) understand and certify that the above information is complete and accurate to the best of my (our) knowledge.

I (We) enclose the non-refundable application fee of \$_____ made payable to the Minister of Finance.

Application Fees:

- Lodge \$200 • Outcamp \$100 • Portable Camp \$100 • Campground \$100 • Related Facility \$25 •
 • Structurally Alter/Expand/Move Lodge \$125 • Structurally Alter/Expand/Move Outcamp \$50 •
 • Move/Expand Portable Camp \$50 • Expand Area of Operation \$25 •

	Applicant Name (Please Print)
Date	Applicant Signature