



Sustainable Development

Your cheque or money order should be made payable to "The Minister of Finance."

For new application, attach a copy of business name, company or corporation registration documents (if applicable).

Allow for a minimum of 28 working days for the processing of this application.

This licence authorizes a Manitoba resident to deal in the pelts, skins and hides of black bears, gray (timber) wolves and fur-bearing animals from a fixed address or location.

If a person intends to deal from more than one location, a separate application is required for each location.

For information on this or any other licence, contact the Wildlife Permits Clerk at 204-945-1893.

APPLICATION FOR FUR DEALER'S LICENCE

A \$25.00 Licence fee must accompany this application.

SEND THIS APPLICATION AND FEE TO:

THE CASHIER
MANITOBA SUSTAINABLE
DEVELOPMENT
BOX 42-200 SAULTEAUX
CRESCENT
WINNIPEG MB R3J 3W3

IS THIS A (Check one)

☐

- NEW APPLICATION

OR

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- LICENCE RENEWAL

For a renewal give the previous or last held
Fur Dealer's Licence number.

NAME OF APPLICANT (person / registered business name / registered company / corporation):

NAME OF CONTACT PERSON (if different from applicant)

MAILING ADDRESS:

CITY OR TOWN:

MB

POSTAL CODE:

TELEPHONE NUMBER:

RESIDENCE

BUSINESS

STREET ADDRESS OR LEGAL DESCRIPTION AND URBAN OR RURAL MUNICIPALITY WHERE BUSINESS WILL BE LOCATED:

BRIEFLY DESCRIBE ACTIVITIES OR PARTS YOU PROPOSE TO BUY OR SELL AND ANY OTHER INFORMATION THAT YOU FEEL WOULD BE HELPFUL IN ASSESSING THE APPLICATION:

I hereby certify that the information provided in this application is accurate to the best of my knowledge and I have read and fully understand the legislation and regulations respecting fur dealers, and request that a Fur Dealer's Licence be issued to me.

SIGNATURE OF APPLICANT:

DATE SIGNED:

FOR DEPARTMENT USE ONLY

District:

DISTRICT COMMENTS (attach sheet if insufficient space):

DATE:

OFFICER'S SIGNATURE:

REGION COMMENTS (attach sheet if insufficient space):

Cashier Validation Box:

DATE:

DIRECTOR'S/ASSISTANT DIRECTOR'S OR REGIONAL WILDLIFE MANAGER'S SIGNATURE: