

This Appendix must be completed for each establishment of the business, whether or not an ATM is operated at that establishment.

## Part 1 – General information

### 1.1 Identification

Name of business applying for licence

### 1.2 Address of establishment

Is an ATM operated at this address?

Yes  No

Civic No.	Street	Suite/Apt./Unit	
City/Municipality		Province/State	Postal code
Main telephone: (    ) _____ - _____			
Fax: (    ) _____ - _____		Website (optional)	