ATIKAMEKSHENG ANISHNAWBEK
25 Reserve Road
Naughton ON P0M 2M0
Phone: (705) 692-3651 Fax: (705) 692-5010
Email: communityskills.coordinator@wlfn.com

Tobacco Retailer License & Tobacco Quota Allocation Application

Applicant Information	
Business Name	
Business Owner	
Primary Contact (if different from owner)	
Primary Contact Information	Phone:
	Alternate Phone:
	Email:
Registered Band Member of Atikameksheng Anishnawbek	YES ☐ Indian Registry Number: _____
Have you previously received tobacco quota for your business?	YES ☐ If yes, when: _____ Allocation Amount (cartons): _____ NO ☐
Requested Allocation Amount	Total Cartons Requested: #_____

Business Information – New Applicants Only					
Business Address (Physical)					
Business Address (Mailing)					
Business Phone					
Business Description (to determine eligibility criteria)	Business Type (i.e. gas station, convenience store):				
	Standalone Building:	Yes ☐	No ☐		
	Signage:	Yes ☐	No ☐		
	Regular Posted Hours:	Yes ☐	No ☐		
	Secure Product Storage:	Yes ☐	No ☐		
Comments (if any)					

Applications must be submitted **by 4:00 PM on January 30, 2026**, along with the **$20 application fee receipt from the Finance Department**, either **in-person to Atikameksheng Anishnawbek** or **by email to** communityskills.coordinator@wlfn.com

(Attn: Tasheena Recollet, Community Skills Development Coordinator).

For Atikameksheng Anishnawbek Administration Only:

Received By: _____

Date: _____ **Time:** _____