

APPLICATION FOR EVALUATION

THIS FORM, DULY COMPLETED SHALL BE ACCOMPANIED BY A **NON-REFUNDABLE** APPLICATION FEE (**TO BE MADE PAYABLE TO NEW BRUNSWICK TOURISM GRADING INC.**) PLEASE REFER TO THE FEE STRUCTURE.

TYPE OF ACCOMMODATION: (CHECK APPLICABLE BOX(ES))

- | | |
|---|--|
| <input type="checkbox"/> HOTEL/MOTEL (H/M) | <input type="checkbox"/> CAMPGROUND |
| <input type="checkbox"/> RESORT (R) | <input type="checkbox"/> FISHING/HUNTING (F/H) |
| <input type="checkbox"/> COTTAGE (C) | <input type="checkbox"/> INN (I) |
| <input type="checkbox"/> BED & BREAKFAST / HOSPITALITY HOME (BB/HH) | <input type="checkbox"/> OTHER |

Please check preferred language English French

1. Name of establishment: _____
2. Address (Location) of Establishment: _____ Municipality of: _____
County: _____
3. Name of Owner: _____ Manager: _____
Address: _____ City/Town: _____
Postal Code: _____ E-mail address: _____
Telephone No. _____ Fax No. _____
4. Name of any person or corporation having an interest in this application: _____
Address: _____ City/Town: _____
Postal Code: _____ E-mail address: _____
Telephone No. _____ Fax No. _____
5. Off-season mailing address (if different) from above
Address: _____ City/Town: _____
Postal Code: _____ E-mail address: _____
Telephone No. _____ Fax No. _____
6. During the 12 months commencing January 1, 20____, property will operate:
 1. Continuously , or
 2. From _____ to _____
 3. Proposed startup date: _____
7. Number of sleeping rooms / units for guests: _____
Number of campsites: _____
8. Food Service: Restaurant Licensed (liquor) Dining Room Licensed Lounge/Bar
 Coffee Meals on Request Full Breakfast
 Continental Breakfast
9. Do you wish to be listed on the Canada/Camping Select Website? Yes No
10. Do you wish to be listed on the Provincial Website: Yes No

I make application for an Evaluation at the Tourist Establishment described above and enclose the **non-refundable** fee of \$ _____

Signature of Applicant: _____ Date: _____

A representative from our office will contact you to establish a time and date for your assessment

PLEASE RETURN TO:
New Brunswick Tourism Grading Inc.
PO Box 3397, Station B
Fredericton, New Brunswick E3A 5H2
Telephone: 506 458-1995
Fax: 506 458-9757
Email: info@experienceselectnb.ca
Website: www.experienceselectnb.ca

-2018 -

CANADA SELECT FEE STRUCTURE

<u># of Bedrooms / Units</u>	<u>Fee</u>
1 – 3	\$ 335.00 + \$7.00 / bedroom / unit, plus HST
4 – 25	\$ 390.00 + \$7.00/ bedroom / unit, plus HST
26 – 100	\$ 415.00 + \$7.00/ bedroom / unit, plus HST
101 +	\$ 475.00 + \$7.00 bedroom / unit, plus HST

CAMPING SELECT FEE STRUCTURE

<u># of Sites</u>	<u>Fee</u>
1 – 49	\$ 299.00, plus HST
50 – 99	\$ 349.00, plus HST
100 – 199	\$ 399.00, plus HST
200 – 299	\$ 449.00, plus HST
300 +	\$ 499.00, plus HST