



# Form A1: Home Occupation Application

Pursuant to Land Use Bylaw No. 24-007

Office Use		
<b>Application Number:</b> <small>(To Match Form A)</small>	<b>Roll No:</b>	
<input type="checkbox"/> Home Occupation 1	<input type="checkbox"/> Home Occupation 2	<input type="checkbox"/> Home Occupation 3

*This supplementary form A1 must be completed in addition to Form A: Development Permit Application if you are applying for a development permit for a Home Occupation. Refer to Bylaw No. 24-007 Part 5, Section 22 for specific Home Occupation criteria and Standards of Development*

## 1. Applicant Information

Applicant's Name: \_\_\_\_\_  
 Phone/Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_

## 2. Home Occupation Information

This business will be an:     On-Site Business     Off-Site/Mobile Business     Both On- and Off-Site

Where will this building operate from?     In-Home     Accessory Building     Other: \_\_\_\_\_

Please attach a site plan and floor plan for the proposed business     Site Plan     Floor Plan  
(Please include any proposed parking spaces and outdoor storage):

Please describe the proposed business, including any goods and/or services provided:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Is there another home occupation already operating out of the residence or on the premises?     Yes     No

## 3. Days & Hours of Operation

Mon: \_\_\_\_\_ am / pm to \_\_\_\_\_ am / pm                      Fri: \_\_\_\_\_ am / pm to \_\_\_\_\_ am / pm  
 Tue: \_\_\_\_\_ am / pm to \_\_\_\_\_ am / pm                      Sat: \_\_\_\_\_ am / pm to \_\_\_\_\_ am / pm  
 Wed: \_\_\_\_\_ am / pm to \_\_\_\_\_ am / pm                      Sun: \_\_\_\_\_ am / pm to \_\_\_\_\_ am / pm  
 Thu: \_\_\_\_\_ am / pm to \_\_\_\_\_ am / pm

## 4. Employees & Clients

Total Number of Non-Resident Employees: \_\_\_\_\_    Total Number of Non-Resident **Off-Site/Mobile** Employees: \_\_\_\_\_

Total Number of Non-Resident **On-Site** Employees: \_\_\_\_\_    Estimated Clients/Customers: \_\_\_\_\_ / Day / Week (circle)



# Form A1: Home Occupation Application

Pursuant to Land Use Bylaw No. 24-007

## 5. Vehicles & Parking

Will the business involve commercial vehicles/trailers on-site in conjunction with the business?  No  Yes

If yes, describe the number of vehicles, use, type, and size (weight), of all commercial vehicles visiting the site:

---

---

---

How many parking spaces for clients, employees, and deliveries will be available?

Clients: \_\_\_\_\_ Employees: \_\_\_\_\_ Deliveries: \_\_\_\_\_

## 6. Outdoor Storage & Flammable Materials

Are any outdoor storage areas proposed? (Vehicles such as those relating to a mechanical shop or car dealership count as outdoor storage)

No  Yes (Describe the type and number of items to be stored and indicate location on site plan)

---

---

Will there be any flammable or hazardous material on the premises as a result of the business?

No  Yes (please list materials and quantity) \_\_\_\_\_

## 7. Additional Development

Are any signs proposed for the home business?  No  Yes (Specify number, type, size, and indicate location on site plan)

---

---

## 8. Declaration of Applicant

The information given on this form is full and complete and is, to the best of my knowledge, a true statement of the facts in relation to the application for a Home Occupation. I also consent to an authorized person designated by the municipality to enter upon the subject land and buildings for the purpose of an inspection during the processing of this application.

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

Registered Owner's Signature: \_\_\_\_\_  
(If different from applicant)

*IMPORTANT: This information may also be shared with appropriate government/other agencies and may also be kept on file by those agencies. The application and related file contents will become available to the public and are subject to the provisions of the Freedom of Information and Protection of Privacy Act (FOIP).*