

HOME OCCUPATION APPLICATION FORM
APPLICANT DETAILS

Name: _____ Phone: _____

Mailing Address: _____

Email: _____

BUSINESS DETAILS

Legal Business Name:

(The name the business Income Tax is filed under) _____

Operating Business Name: _____

Business Address: _____

Email: _____ Phone: _____

Description of business: _____

Is your operating business name a registered Trade Name or Sole Proprietor? **YES** **NO**

Do you want a short-term licence? (valid for 4 consecutive months in a calendar year) **YES** **NO**
If yes, please provide your proposed start date _____

ADDITIONAL INFORMATION

Please respond to all 9 questions listed below: **YES** **NO**

1. Will you have customers to your home?

If yes, how many customers per week are you anticipating? _____

2. Will you have employees coming to the residence?

If yes, how many employees, and what is their purpose for coming to the residence?
(ie. To work at the residence, carpool, pick up/drop off, etc.)

3. Will you have more than one vehicle used in conjunction with your business?

If yes, how many vehicles will be used by the company, and where will they be parked/stored?

If you have answered 'YES' to any of the above questions, you will require a Development Permit.

Please submit the Development Permit requirements listed on the reverse side.

4. Will you require the use of a trailer for your business?

If yes, what kind of trailer (ex. Enclosed utility trailer, gooseneck trailer, etc.), and where will it be parked/stored?

5. Will you be expecting regular deliveries to your home, as part of the business operations?

If yes, how many deliveries each week are you anticipating? _____

6. Will you require the use of an accessory building to accommodate the daily operations of your business?

If yes, please describe: _____

Continued on reverse side...

	YES	NO
7. Will you have any outside storage of equipment or materials in connection with your business? If yes, please explain: _____		
8. Does your business require the use or storage of hazardous, noxious or dangerous goods? If yes, please explain: _____		
9. Will the daily operations of your business cause the emission of dust, noise, odor, smoke, electronic interference, bright lights, etc. If yes, please describe: _____		

A Development Officer will review your responses for questions 4 through 9,
and will determine if additional information and/or a Development Permit is required.

DEVELOPMENT PERMIT REQUIREMENT LIST
A Development Permit addresses any variance or exception to the regulations outlined in The City of Red Deer <i>Land Use Bylaw</i> .
<ol style="list-style-type: none"> 1. A Site Plan (<i>Google Maps satellite image or RPR</i>), showing the following criteria: <ul style="list-style-type: none"> - North Arrow; - Property lines shown and labelled; - Location of building(s) in relation to property lines; including front, rear, and side yard setbacks; and - Location, dimensions, and number of on-site parking areas. 2. A Letter of Intent providing the following information: <ul style="list-style-type: none"> - Detailed description of proposed business; - Hours and days of operation; - Anticipated number of clients <u>per day</u> and <u>per week</u>; - The approximate area of the space you are using in your home for the business; and - Methods of advertising you intend to use. 3. Letter of Authorization from property owner (registered on title), including contact information. 4. A copy of the Certificate of Title, dated within the last thirty (30) days.

Please initial and sign to confirm your acknowledgement of the terms of this application.		
I acknowledge that all information in this application is correct to the best of my knowledge, and will be reviewed by Inspections and Licensing. The application may be delayed or refused if the requirements and/or information provided is incomplete or does not conform to any other bylaw or enactment of Alberta or Canada.		
I authorize Inspections and Licensing to create the Development Permit, if required, and will accept responsibility of payment for this permit, in addition to the Business Licence.		
I verify that I am the owner or have received authorization from the property owner(s) to operate a business at the location provided in this application.		
I understand the information provided as part of this application will be used in an Online Business Directory. Home Occupation business addresses will not be included in the directory.		
I verify that I am at least 18 years old or have an agent at least 18 years of age sign/authorize on my behalf.		
I acknowledge that all business operations will comply with the <i>Business Licence Bylaw</i> , and the <i>Land Use Bylaw</i> , knowing that failure to comply may result in penalties, suspension, or revocation of my Business Licence.		
<table style="width:100%; border: none;"> <tr> <td style="border-bottom: 1px solid black; width: 50%; text-align: center;">Name of Applicant</td> <td style="border-bottom: 1px solid black; width: 50%; text-align: center;">Signature of Applicant</td> </tr> </table>	Name of Applicant	Signature of Applicant
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