Development Permit Application

Application for Development Permit



Application Submission Date: LLOYDMINSTER is the project already constructed? □ No OFFICE USE ONLY Municipal Address 3203-43 1 Avenue PROJ Application # Tax Roll # Zoning District Legal Description: Lot Block 4 Plan LO 199 325 Permit # Applicant Name Permit Fee Address 3203 43A Avenue City LloyDMINITER INFORMATION APPLICANT Province VAJKATCA FWAN Postal Code S9V2=6 Receipt # Approved by Ema Refused by Valid Date (If property owner is different from applicant Owner Authorization Form is required) Owner Authorization Form Attached? Tyes No N/A **Expiry Date** Development Class: Residential 🔲 Industrial 📋 Commercial 🔲 Institutional 🗎 Multi-family - # of Units Proposed Development: (Select all that Apply) Permitted Use ☐ Discretionary Use ☐ Variance Application ■ New Construction ☐ Front Deck DEVELOPMENT INFORMATION ☐ Renovation ☐ Rear Deck Addition Other: ☐ Foundation ☐ Income Suite: ☐ Secondary to Home ☐ Garage Suite ☐ Garden Suite □ Superstructure ☐ Business License Use Approval for (type of business): [■ New Dwelling Home Based Business: Minor Major ☐ Accessory Building Description of Home Business FOOD -BACED ☐ Attached Garage Detached Garage I hereby declare I am I represent the owner of the property on which the work identified in this application will be conducted in DECLARATION accordance to the plans submitted, and upon approval will adhere to the conditions/terms of Land Use Bylaw 5-2016. I/We will notify the Development Authority of any proposed changes to the plans submitted with this application. Note: By typing your name into the signature box below (or by signing a printed version of this application), you agree that all information submitted on this form is true and accurate. Signature of Registered Owner / Agent **OFFICE USE ONLY** DECISION Development Officer Collection and Use of Personal Information: The personal Information being collected on this form is for the purposes of processing and acting upon this application in accordance with the Municipal Government Act, and is protected by the privacy provisions of the Freedom of Information and Protection of Privacy Act (FOIP). The City will not share your personal information for purposes outside of those stated without your permission in writing, unless there is a specific exemption stated in the Municipal Government Act. IMPORTANT NOTICE: THIS APPLICATION DOES NOT PERMIT YOU TO COMMENCE CONSTRUCTION UNTIL SUCH TIME A DEVELOPMENT PERMIT HAS BEEN ISSUED BY THE DEVELOPMENT AUTHORITY AND ALL OTHER PERMITS (IF REQUIRED) ARE APPROVED. IF A DECISION HAS NOT BEEN ISSUED WITHIN 40 DAYS OF THE DATE THE APPLICATION IS DEEMED COMPLETE, YOU HAVE THE RIGHT TO FILE AN APPEAL TO THE SUBDIVISION AND DEVELOPMENT APPEAL BOARD. APPEALS TO THE SUBDIVISION AND DEVELOPMENT APPEAL BOARD. APPEALS TO THE SUBDIVISION AND DEVELOPMENT APPEAL BOARD CAN ALSO BE FILED IN REGARDS.

Home Office/Occupation Questionnaire Application for Development Permit



Office Use Only	
DP#	

Date:	Jay	5,	2010	1.
	- /			

Applicant Name:	Mailing Address: 13203 43A LLOYDININSTER (SK SQV2E6
Affected Civic Adordard 3206 43 A Property Owner (Print)	Lot 13 Block 4 Plan 16199326)
roperty owner trinity	Property Owner (Signature)

Part 1 - General Information - CIRCLE YES or NO

1.	Does your office/business require you to perform duties other than paperwork in your home?	(YES OR NO
2.	Will there be an office in your home that will be used for the exchange or sale of goods and/or services from the confines of your dwelling?	YES OR(NO
3.	Is there a rental unit (secondary, garden or garage suite) in your primary dwelling or on your site?	YES OF NO
4.	Will any goods stored be viewed from the street of adjoining properties? If Yes, please provide a Site Plan indicating where goods will be stored on the property.	YES OF NO
5,	Will there be any structural, mechanical or electrical equipment used to carry on or support your business?	YES OR NO
6.	Will your office/business generate noise, vibration, smoke, dust, odor, heat or glare?	YES OR NO
7.	Will the business generate more vehicle or pedestrian traffic?	YES OR NO
8.	Besides your own personal vehicle, will there be vehicles/equipment utilized by the business?	YES OR NO
9.	Will there be clients, customers, students or animals coming into your home?	(YES OR NO
10.	Will you hire staff other than those residing at this location?	YES OR NO
11.	Will you be erecting a sign for your office or business on your property?	YES OR NO
12.	Have you considered locating this Home Occupation to either a commercial or industrial zoned site?	YES OF NO
13.	Does the proposed occupation occupy greater than 15% of the homes floor space?	YES OR NO
14.	Have you attached owner authorization if you are not the sole property owner and/or you are a member of a Condo Association?	YES OR NO
15.	Do you have or have you applied for a City of Lloydminster Business License?	YES OR NO
	Do you reside (live) in the home?	YES OR NO

6623 52 Street, Lloydminster AB/SK T9V 3T8 | P: 780 874 3700 | www.lloydminster.ca Email: permits@lloydminster.ca

Home Office/Occupation Questionnaire Application for Development Permit



Part 2 - Clarification

	Off	ice	Use	Only	
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Billion					-

 In the space below please provide further clarification to any questions that were answered "YES" to on page 1 	
J. ITS A FOOD-BASED BUSINESS	_
9. CLIENTS TO PICK UP DEDERCY	
10. 710CR AREA 25%	
16. THIS OUR PRIMARY RESPONDENCE	
	_
Part 3 - Business/Office Details	
1. What is your business name? TM FOOD TO GO	-
2. What type of business do you intend to operate?FOOD_BAYED_IBULINESS	_
3. What services are you providing and/or what is being sold from your home? <u>FOOD GOODS</u>	
4. Are there any other offices or businesses operating at this address? ☐ Yes ☐ No	
If yes, describe	
5. What is the total floor area (including the basement area) in square feet is your home? 5233.8438 sq f	<i>†</i> .
6. How much of the total floor area in square feet will be used for the office/business? 1,308.44 GA FF.	
7. What are the dimensions of the rooms used for your home office/business?/	
8. What days of the week will your business operate?	
9. Between what hours will your business operate? 12 pm - 5pm	
10. How many clients per week will be coming into your home? Les than 10	
11. How many client vehicles can be accommodated on your property (not including street parking)? \(\begin{align*} ali	
AUTHORIZATION:	
declare that to the best of my knowledge and ability, the information provided to be true and accurate	
mm3/	
Applicant Signature Date	-
/ 1/	

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Certificate of Completion



has successfully completed the requirements of the

The Saskatchewan Food Handlers Training Program Using The Basic.fst© Training Manual And Resources.

Course Recertification Due On September 8th, 2022

Roger Piatt, Public Health Officer



