

Development Permit Application

Application for Development Permit



Application Submission Date: June 30, 2020

LLOYDMINSTER

PROJECT	Is the project already constructed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OFFICE USE ONLY	
	Municipal Address: <u>1504 4th Avenue</u>	Application # <u>20-1363</u>	
APPLICANT INFORMATION	Tax Roll # <u>1-2060307000</u> Zoning District <u>R1</u>	Permit #	
	Legal Description: Lot <u>62</u> Block <u>4</u> Plan <u>102035304</u>	Permit Fee <u>\$360.00 / DISA</u>	
	[Redacted]	Receipt # <u>573125</u>	
	[Redacted]	Approved by	
	[Redacted]	Used by	
	(If property owner is different from applicant Owner Authorization Form is required)	Valid Date	
	Owner Authorization Form Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Expiry Date	
DEVELOPMENT INFORMATION	Development Class: <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Institutional <input type="checkbox"/> Multi-family - # of Units		
	Proposed Development: (Select all that Apply) <input type="checkbox"/> Permitted Use <input type="checkbox"/> Discretionary Use <input type="checkbox"/> Variance Application		
	<input type="checkbox"/> New Construction	<input type="checkbox"/> Front Deck	
	<input type="checkbox"/> Renovation	<input type="checkbox"/> Rear Deck	
	<input type="checkbox"/> Addition	<input type="checkbox"/> Other: _____	
<input type="checkbox"/> Foundation	<input type="checkbox"/> Income Suite: <input type="checkbox"/> Secondary to Home <input type="checkbox"/> Garage Suite <input type="checkbox"/> Garden Suite		
<input type="checkbox"/> Superstructure	<input checked="" type="checkbox"/> Business License Use Approval for (type of business): <u>Daycare</u>		
<input type="checkbox"/> New Dwelling	<input checked="" type="checkbox"/> Home Based Business: <input type="checkbox"/> Minor <input checked="" type="checkbox"/> Major		
<input type="checkbox"/> Accessory Building	Description of Home Business <u>Home Daycare</u>		
<input type="checkbox"/> Attached Garage			
<input type="checkbox"/> Detached Garage			
DECLARATION	I hereby declare <input type="checkbox"/> I am <input checked="" type="checkbox"/> I represent the owner of the property on which the work identified in this application will be conducted in 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		
DECISION OFFICE USE ONLY	[Redacted Signature]	<u>26th of June 2020</u>	Date of Application
	Development Officer		Issued Date

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 CAN ALSO BE FILED IN REGARDS TO PERMIT REFUSALS AND/OR CONDITIONS WITHIN 21 DAYS OF A DECISION.



Inspection Date: 05/26/20 Re-Inspection Date: _____ Compliance
DD/MM/YY DD/MM/YY

MARK ONE OF THE FOLLOWING IN THE BOX PROVIDED
Check (✓) or A = Acceptable X = Corrective Measures Required N/A = Not Applicable

	1st Inspection	Re-Inspection
1. Is the building address visible?	✓	
2. Do the Fire Department connections appear in good condition?	N/A	
3. Are the fire hydrants visible, accessible, and free of defects?	✓	
4. Are natural gas pipes firmly anchored and the regulator protected from collision?	✓	
5. Are combustibles and garbage containers stored at a safe distance from the building?	N/A	
6. Are all egress doors and stairways in good repair and free of obstruction?	✓	
7. Does the fire alarm control panel appear to be operational?	N/A	
8. Are walls, ceilings, and doors that separate commercial units free of breaches?	N/A	
9. Does the main exit and all required exits have unobstructed, clear aisles?	✓	
10. Are all existing signs visible, fully illuminated, and free of defects?	N/A	
11. Are there an adequate number of fire extinguishers?	✓	
12. Are all fire extinguishers visible, accessible, and free of defects?	✓	
13. Have all fire extinguishers been tagged and inspected within the last twelve months?		✓
14. Does the emergency unit lighting operate/illuminate, and does it appear undamaged?	N/A	
15. Is the required emergency plan posted?	✓	
16. Is the building/occupancy limit posted? <u>As per 5A31 of the code</u>	N/A	
17. Do exhaust systems appear to be free of lint and/or grease and have been inspected? Date:	✓	
18. Has the special extinguishing system been inspected (semi-annually)? Date:	N/A	
19. Does the standpipe system appear in good condition?	✓	
20. When was the standpipe hose last tested? Date:	N/A	
21. Has the Sprinkler system been tested (annually)? # Systems: _____ Date: _____	N/A	
22. Are crawl spaces, concealed spaces, ceiling spaces and roofs free of stored combustibles?	✓	
23. Are electrical panels accessible and clear of obstructions?	✓	
24. Are electrical panels, outlets, switches, fixtures and wiring in good repair?	✓	
25. Are approved extension cords used in acceptable manner?	✓	
26. Is the area around heating appliances such as furnaces, fireplaces, and electrical heaters clear of combustibles?	✓	
27. Are heating appliance exhaust pipes free of visible defects and clear of combustibles?	✓	
28. Are propane cylinders stored in an approved manner (outdoor only)?	✓	
29. Are approved containers being used to store flammable/combustible liquids?	✓	

You are hereby notified that the above conditions shall be corrected in accordance with the requirements of the Alberta Fire Code. A re-inspection will be made on/after DD _____ MM _____ YY _____ to determine compliance. Failure to comply with this notice by the re-inspection date may result in legal action.

COMMENTS/CONCERNS Handwritten note: ...

ANY QUESTIONS CONCERNING THIS INSPECTION SHOULD BE DIRECTED TO THE DEPARTMENT AT PHONE #: 306-825-6515

INSPECTED BY: [Signature]

Home Office/Occupation Questionnaire Application for Development Permit



LLOYDMINSTER

Office Use Only

DP # _____

Date: 26th of June 2020

App Aff Pro	Mailing Address: <u>1504 47-A Avenue, Lloydminster, SK, S9V 2G8</u>
	Lot _____ Block _____ Plan _____
	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 OR 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 OR 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 OR 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
16. Do you reside (live) in the home? YES OR NO

Home Office/Occupation Questionnaire Application for Development Permit



LLOYDMINSTER

Part 2 – Clarification

Office Use Only

DP # _____

1. In the space below please provide further clarification to any questions that were answered "YES" to on page 1

Part 3 - Business/Office Details

1. What is your business name? Chrisen Daycare and Learning Center
2. What type of business do you intend to operate? Home Daycare
3. What services are you providing and/or what is being sold from your home? Daycare
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? _____
6. How much of the total floor area in square feet will be used for the office/business? _____
7. What are the dimensions of the rooms used for your home office/business? _____
8. What days of the week will your business operate? Monday to Friday
9. Between what hours will your business operate? 7:30 A.M. - 5:00 P.M.
10. How many clients per week will be coming into your home? _____
11. How many client vehicles can be accommodated on your property (not including street parking)? _____

AUTHORIZATION:

I declare that to the best of my knowledge and ability, the information provided to be true and accurate

A [Redacted Signature]

20th of June 2020

Date

Amy Moore

From: [REDACTED] n>
Sent: [REDACTED]
To: [REDACTED]
Subject: Re: Development Permit - Home Day Care

EXTERNAL SENDER: Do not click links or open attachments unless you recognize the sender and know the content is safe.



Hello Ms. Amy,

We are willing to abide by the time frame consistent with the procedural requirement to get a Business Permit in the City of Lloydminster, we may be a little excited, but we have to succumb to the rules.

Additional information and clarification in relation to our business permit application.

1. Are you going licensed family day home in the Province of Saskatchewan or act as a private babysitting facility (Will you be approved or monitored by a Family Day Home Agency)

. Yes, in fact we are on the process of getting our CPR certificates from St. John Ambulance as requisite for family day home license in the Province of Saskatchewan.

2. Are their any minors that currently reside in the home? If so, how many?

. There are none, although I have three minors, they are not currently residing in the home daycare since we have our separate home for the family.

3. How many children do you plan on having as part of your day care on a regular basis?

. We are planning to have children as part of our daycare on a regular basis to the maximum or whatever may be allowed by the rules of the

Province of Saskatchewan and the City of Lloydminster, respectively.

4. What are the ages of the children you plan on having as part of your day care?

. The ages of children we plan of having as part of our daycare are the following, to wit;

. Infants/ Toddler- 6 weeks to 29 month old

. Preschool/ Kindergarten- 30 months old

. School-age- Grade one to 13 years old

5. The square footage of the home is approximately 1046 Square feet on the main floor and 1020 square feet in the basement, how much of the home do you plan on using as part of the day care? Approximately how many square feet?

. Except for the one bedroom on the main floor, we are planning to utilize the entire home for daycare services including the 1020 square feet space in the basement.

6. Please provide us with a drawing of your home (can be hand drawn) showing where play areas will be, the dimensions of the rooms used and where windows are located.

. Please see attached illustration for further guidance.

7. Are you renting the entire house or is there a separate unit that is rented out?

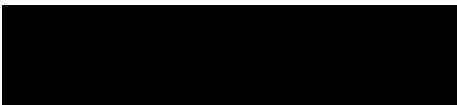
. Yes, we are renting the entire house purely for Family Child Care Home purposes only.

8. How many off street parking spots can you accommodate for drop off and pick up as part of your day care?

. We have two off street parking spots to accommodate drop off and pick up.

Thank you so much for your support and assistance, without which, we could have hardly started the process.

Kind Regards,

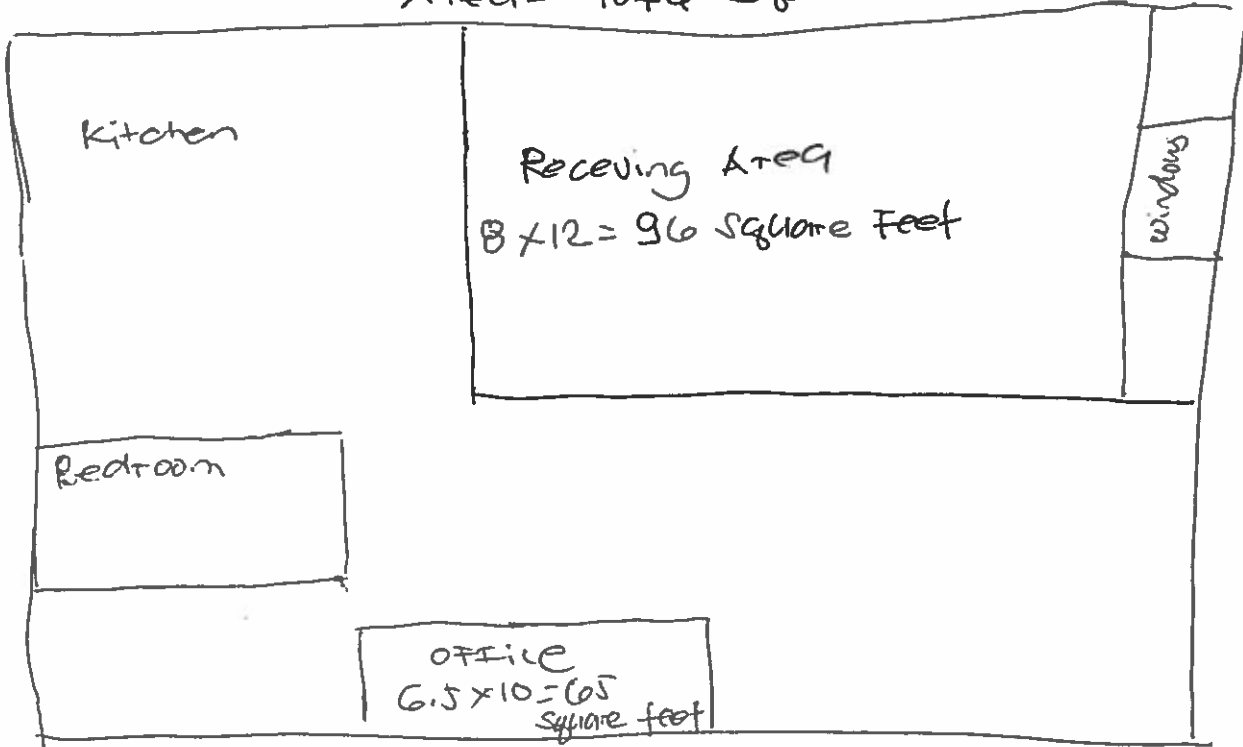


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Rough estimate of the parts of daycare that would be used for home daycare services.

TRAIN FLOOR

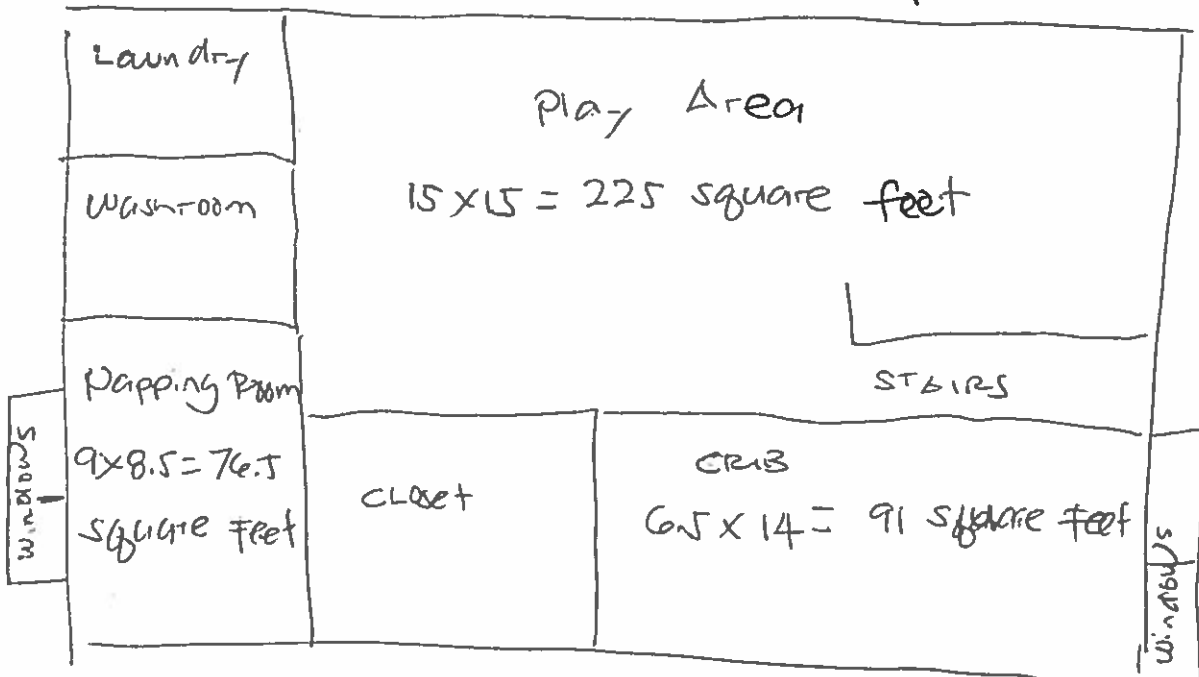
Area - 1046 square feet



train street

BASEMENT

Area - 1026 square feet



Amy Moore

To:

[REDACTED]

Subject:

RE: Development Permit - Home Day Care

[REDACTED]

Greetings!

I and my spouse will be living in our home daycare while my 2 adult children and 3 minor kids will stay in our separate home only a kilometer away from our daycare centre.

That is the very reason why I reserved one bedroom on the main floor.

Our gratitude!

Truly,

[REDACTED]

One additional question for you. Where you stated you have a separate home for the family does that mean you are not living in the home where the day care is going to be run? Will it just be for the day care only? Basically you will open in the morning and close at night?

Thanks again in advance for the clarification.

Kind Regards,

[REDACTED]



OWNER AUTHORIZATION

Office Use Only

DP # _____

Date: 16th of June 2020



***REQUIRED IN THE ABSENSE OF THE OWNER'S SIGNATURE ON THE APPLICATION FORM
MUNICIPAL GOVERNMENT ACT, RSA, 2000, CHAPTER M-26**

I [Redacted] OF _____
Registered Owner Name Company (If Applicable)

BEING THE REGISTERED OWNER OF:

Legal Description: Lot(s) _____ Block _____ Plan _____ Other 1504 47-A AVENUE Lloydminster SK
SAVIPI

Municipal Address (If Applicable) _____ Tax Roll : 12060307000

Do hereby authorize: [Redacted] to make an application for the above noted property.

Please Check the Appropriate Box(es):

- Rezoning
- Subdivision
- New or Amended Area Structure Plan or Area Re-Development Plan
- Development Permit
- Property File Information (May be limited or require a FOIP request as per Freedom of Information and Privacy Act)
- Other _____

Period of Authorization:

Effective Date: (mm/dd/yyyy): 06-16-2020

Expiry Date: (mm/dd/yyyy): 06-16-2021

