

Development Permit Application

Applicant/Business Name: [REDACTED]

Address: 2702 - 45 Ave

Lot: 26 Block: 8 Plan: 83B 08817

Tax Roll # 12026819000 Land Use District: R1

PERMITTED Or DISCRETIONARY Application Fee: \$ 350⁰⁰

Invoice/Receipt # 751898 Method of Payment: Master Card

DP Application # 23-3306 DP # _____

NOD Issued Date: _____ APPROVED or REFUSED

Development Officer Signature: _____

Your personal information will be collected under the authority of Section 25 of the *Local Authority Freedom of Information and Protection of Privacy Act*. Information will only be used to administer the Business Licence application. If you have any questions about the collection please contact the Office of the City Clerk at 780-875-6184 or email cityclerk@lloydminster.ca.

Business Licence Application

BUSINESS LICENCE TYPE

The following questions will be used to determine the type of business licence you are applying for.

Will your business be located within the City of Lloydminster? *

Yes

No

Which of the following apply to your business? * ?

Child Care Facility

Not-for-Profit

Farmers Market

Mobile Vendor

Pop Up Store

Professional

Youth Entrepreneur

None of the above

PLEASE TELL US ABOUT YOUR BUSINESS

Please describe your business activity *

product sales, workshops, services

What industry does your company fall under:

*

44-45- Retail Trade

Business Licence Application

BUSINESS CIVIC/OPERATING ADDRESS

Is your business incorporated? *

No

Yes

First Name *

Last Name *

[Redacted Name Fields]

Operating/Trade Name

Operating Address: *

City: *

Province/State: *

[Redacted Operating Address]

Lloydminster

SK

Is this address a residential property in Lloydminster? *

Yes

No

Does the business have multiple physical locations in the City of Lloydminster? *

Yes

No

BUSINESS MAILING ADDRESS

Is the mailing address the same as the physical address? *

Yes

No

OTHER INFORMATION

Business Start Date *

3/1/2023



How long has your company been in business (Years)? *

0

Number of Full Time Employees (including owner): *

2

Number of Part Time Employees: *

0

What is the square footage of the business? *

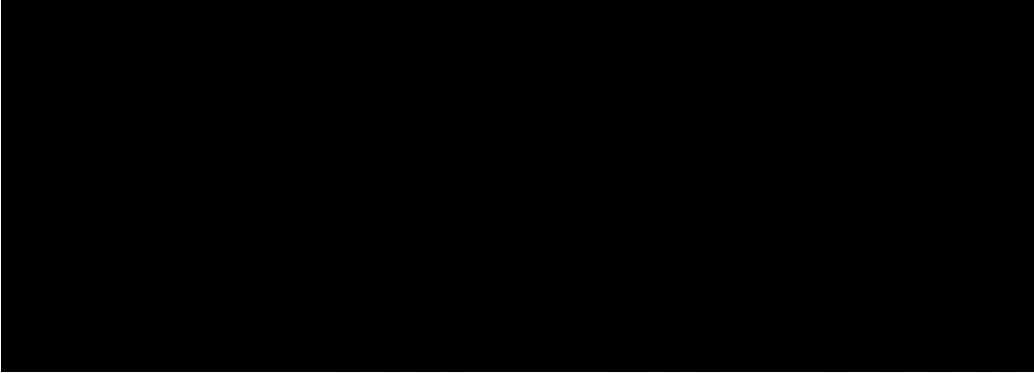
250

Business Licence Application

CONTACT INFORMATION

Name: *

Position/Title: *

A large black rectangular redaction box covers the contact information fields for Name and Position/Title.

Business Licence Application

Development Permit Application

A Development Permit is required when the proposed use has never been approved or has expired at a specific address. All uses must comply with district regulations in Land Use Bylaw 5-2016 being the bylaw to regulate the use and enjoyment of the lands in the City.

Have you applied for a Development Permit? *

Yes

No

Business Activity/Description * ?

Personal Services

PROPERTY OWNERSHIP

Is the address previously provided your primary residence? *

Yes

No

Are you the registered property owner or land owner? *

Yes

No

Is the property part of condo association? *

Yes

No

Is the property/land owned by a corporation? *

Yes

No

Will the property be used for the exchange or sale of goods and services? *

Yes

No

Are there any other businesses operating at this address? *

Yes

No

Is there a secondary suite/rental unit on this property/land? *

Yes

No

Does the proposed business occupy greater than 15% of the home-floor space (including the basement)? *

Yes

No

GENERAL BUSINESS

What days of the week will your business operate? (Please select all that apply) *

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

Hours of Operation - Business Open Time *

09:30 AM



Hours of Operation - Business Close Time *

08:00 PM



How many clients/customers per week will be coming into your property? *

0

Is this dwelling in a Cul de Sac? *

Yes

No

Will you be erecting a sign for your office or business on your property? *

Yes

No

BUSINESS OPERATIONS

Will your business be storing materials on the property? *

Yes

No

Please list in detail the material storage expected (please indicate if any are dangerous goods) *

crystals, tarot cards, bath salts, coffee scrub, face mask, loose herbal tea, essential oil roller bottles, essential oil spray, jewelry making supplies, shipping supplies

Please list the locations of the stored materials *

basement storage shelving

Please complete the remainder of the form. A member of the City of Lloydminster will contact you regarding the approval process.

Will you be using any large equipment or machinery to support your business beyond office/administrative? *

Yes

No

Besides your own personal vehicle, how many additional vehicles would be utilized by the business? *

1

Please list vehicle types and GVW *

Ford Explorer, 6160lbs
Nissan Qashqai, 1500kg

Does this Business Support any of the following (select all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Adult Entertainment | <input type="checkbox"/> Dating or Escort Services |
| <input type="checkbox"/> Fleet Services | <input type="checkbox"/> Automotive Service or Repairs |
| <input type="checkbox"/> Industrial or Recreational Vehicle Sales, Rentals, storage, service, or repairs | <input type="checkbox"/> Any Industrial Use including salvaging, recycling, warehousing |
| <input type="checkbox"/> Use of Commercial Power Tools, machinery requiring any external venting, vacuums, blowers or exhaust ports | <input type="checkbox"/> Storage of hazardous, noxious or dangerous goods |
| <input type="checkbox"/> Animal breeding or overnight kenneling | <input type="checkbox"/> Radio Transmission equipment |
| <input type="checkbox"/> Sale, storage or service of firearms, fireworks or ammunition | <input type="checkbox"/> Cannabis production, distribution, sales, or lounge |

How many off street parking stalls are you providing? *

0



April 4, 2023

Property Owner

**RE: Landowner Notification
Development Permit – Discretionary Use
Development Permit Application No: 23-3306**

Dear Property Owner:

Please take notice that a neighbor who is within a thirty (30) metre radius of your property boundary has submitted the following Development Permit Application for the purposes of a **Home-Based Business: Major (Personal Service Shop)** at **2702 - 45 Avenue** and it is being reviewed in accordance with Land Use Bylaw 5-2016.

| Affected Address | Discretionary Use | Application # |
|--|---|---------------|
| 2702 - 45 Avenue Lot: 26, Block: 8, Plan: 83B 08817 | Home Based Business: Major Personal Service Shop | 23-3306 |

The City of Lloydminster’s Land Use Bylaw 5-2016 grants the Development Officer the authority to consider the proposed use on this application. Any person that objects to the use may deliver to the Development Officer a written statement of their objections within fourteen (14) days of this letter indicating:

- Full name and address; and,
- Reasons for objection(s) to the proposed use.

Please note that a full name and addresses are required for submission of valid comment(s). If the submission is not accompanied by this information the written statement may be deemed invalid and rejected.

Written comments and general inquiries on the proposed use may be submitted by contacting:

Roxanne Shortt
City Operations Centre (6623 – 52 Street)
Phone: 780-874-3700 Ext 2608
Email: rshortt@lloydminster.ca

Additional information about the application can also be viewed on the City of Lloydminster website at:

www.lloydminster.ca/en/your-city-hall/permits

To locate the information search under the Discretionary Permit option and then by select the application number you wish to review.

If you have any questions, or require any clarification, please contact the undersigned at (780) 874-3700 or by email at rshortt@lloydminster.ca.



**Development Officer, Planning
Operations Centre**