

Business Licence Application

Businesses operating in the District of Ucluelet are required to have a valid business license. **Completion of this form does not guarantee approval of a business licence, nor should business be commenced prior to a licence being issued.** Please fill out both pages of the application and submit with your \$25 application fee to District of Ucluelet.

Type of Application

New Licence

Change of Owner

All other changes to business, please use the "Change In Business Application" Form – available at ucluelet.ca

Applicant & Property Owner Information

APPLICANT

Name: _____

Address: _____

Postal Code: _____

Email : _____

Phone: _____

PROPERTY OWNER

Name: _____

Address: _____

Postal Code: _____

Email : _____

Phone: _____

Business Contact Information

Business Name: _____

Business Location Address: _____

Business Mailing Address: _____

Business Email Address: _____ Business Phone: _____

Business Website Address: _____

Notice of Personal Information Collection: The personal information on this form is being collected for the purpose of processing your application in accordance with section 26(c) of the Freedom of Information and Protection of Privacy Act. For more information about how this information will be used, please contact the Manager of Corporate Services at 250-726-7744. NOTE: The contact information provided in the Business Contact Information section of this form is not considered personal information and will be released upon request.

The undersigned makes an application as specified herein, and declares that the information submitted in support of the application is true and correct in all respects and consents to business contact information being made available to the public and posted on the District of Ucluelet website.

Applicant's Signature: _____ Date: _____

Property Owner's

Signature OR _____ Date: _____

Property Owner's Authorization Letter attached to application.

For Office Use Only

Folio No.:	Zoning:	Business Class/Nature of Business:			Number of Units:
Department	Check/Site Inspection Required?	Approved	Date	Initial	Finance Section
Planning	Yes No	Yes No			Utility Bill Change? Yes No Comments: _____
Building	Yes No	Yes No			
Fire	Yes No	Yes No			
Bylaw	Yes No	Yes No			
Other: _____	Yes No	Yes No			

Approved this _____ day of _____, 20_____.

District of Ucluelet Approval: _____ Business Licence No: _____

Business Information	
Type of business	
Brief description of business (Staff will use to verify type of business listed above)	
Uses currently contained on the property:	
To the best of your knowledge is the property subject to a Development Permit?	
Will there be any discharge into the District sewers other than domestic sewage? i.e. mash from breweries, commercial kitchen etc Please describe.	

ALL ACCOMODATION PROVIDERS (INCLUDING BED AND BREAKFASTS) FILL OUT THIS SECTION		FOR STAFF USE
Indicate the number of bedrooms	Provide a to-scale floor plan that shows the accommodation use (identify max 3 B&B rooms if applicable).	
Indicate number of off-street parking spots provided	Provide site plan that clearly shows parking (including residence and B&B spots if applicable).	

BED & BREAKFAST PROVIDERS		FOR STAFF USE
<i>For Owner- Operators: I authorize District of Ucluelet staff to search the District of Ucluelet Home Owner Grant records which include owner name, address, roll number and other tax information to verify my residency at the Bed and Breakfast premises in order to establish compliance with the Ucluelet Business Regulation and Licensing Bylaw No. 922, 2003 (as amended).</i> Applicant Signature: _____ Date: _____	Home Owner's Grant proof confirmed	
<i>For Non-Owner Operators: Provide (IN PERSON) one of the following to establish proof of residency: Bills with name and address; Identification with name and address; Tax notices with name and address; Insurance documents; Vehicle Registration; OR Other proof of residency</i>	Non-owner resident proof confirmed	
Phone number where the B&B operator is available to respond to business-related matters		
Bed & Breakfast - Acknowledgement and Agreement to Bylaw No. 1160, 2013 <i>I have read and understood Section 404 of Bylaw No. 1160, 2013 and agree to abide by the terms set therein</i>		_____ Applicant Initial

RESTAURANTS, CAFES AND LICENCED ESTABLISHMENTS FILL OUT THIS SECTION		
Number of seats available		
Number of off-street parking spots provided		
Are you a licenced establishment? If "Yes" provide copy of Liquor Licence	Yes, I will provide a copy of liquor licence	Not Applicable
VIHA Health Certificate	Yes, I will provide a copy of the health certificate	

FOR MARINE BASED BUSINESSES, INCLUDING KAYAKS (attach separate page if the space below is insufficient)	
Number of vessels and total capacity	
Names, licence or registration numbers of the vehicles, boats, and aircraft described above	
The passenger capacity of each vehicle, boat, and aircraft described above	
All locations where passengers disembark or embark from each vehicle, boat or aircraft described above	
All locations where each vehicle, boat, aircraft described above is stored, moored or parked when not in operation	
Proof of \$2,000,000 liability, wreck removal and sudden and accidental pollution coverage	Yes, I have supplied proof of insurance

FOR RETAIL BUSINESSES	
Square footage of business	
Number of off street parking spots	
Staff washroom facilities available on site	Yes, staff washrooms are available on site.