

## BED & BREAKFAST BUSINESS LICENCE APPLICATION

|  |  |                               |  |                   |  |  |  |
|--|--|-------------------------------|--|-------------------|--|--|--|
| <b>Licence Number:</b>   |  |                               |  | <b>Date:</b>      |  |  |  |
| Business Name:   |  |                               |  | Open Date:        |  |  |  |
| Owner Name(s):   |  |                               |  | Phone:            |  |  |  |
|  |  |                               |  | Phone             |  |  |  |
|  |  |                               |  | Business Phone:   |  |  |  |
| Email:   |  |                               |  |                   |  |  |  |
| Website:   |  |                               |  |                   |  |  |  |
| Business Location:   |  |                               |  | Mailing Address:  |  |  |  |
|  |  |                               |  |                   |  |  |  |
| Links to online advertisements:  |  |                               |  |                   |  |  |  |
| Describe rooms available for rent:   |  |                               |  |                   |  |  |  |
|  |  |                               |  |                   |  |  |  |
| Number of employees (including owner(s)):  |  |                               |  |                   |  |  |  |
| Number of parking spaces:  |  |                               |  | Invoice Annually? |  | <input type="checkbox"/> YES <input type="checkbox"/> NO |  |
| <p>I/We hereby make application for a licence in accordance with the particulars stated in this application, declare the above statements are true and will comply with each and every obligation contained in all laws and Bylaws now in force or which may hereafter come into force in the Village of Pemberton.</p> <p>The Village reserves the right to suspend or cancel a business licence where the applicant has knowingly provided false information to the Village with regard to the operation, ownership or any other aspect of the business in question.</p> <p>It is understood that the Business Licence fee is payable to the Village at the time of application. Fees for approved Business Licence applications are non-refundable.</p> |  |                               |  |                   |  |  |  |
|  |  |                               |  |                   |  | , 20   |  |
| <i>Name of Applicant</i>   |  | <i>Signature of Applicant</i> |  | <i>Date</i>       |  |  |  |
| <p>Personal information you provide on this form is collected pursuant to section 26 of <i>the Freedom of Information and Protection of Privacy Act</i> and will only be used for the purpose of processing the business licence application. Your personal information will not be released except in accordance with <i>the Freedom of Information and Protection of Privacy Act</i>. Questions about the collection of your personal information may be referred to Sheena Fraser, Manager of Corporate &amp; Legislative Services (sfraser@pemberton.ca or 604-894-6135).</p>  |  |                               |  |                   |  |  |  |

## BED & BREAKFAST BUSINESS LICENCE APPLICATION REQUIREMENTS

**The Business Licence Fee is due upon submission of a completed Business Licence application. Fees are non-refundable once a Business Licence has been issued.**

Please note that Business Licence must be renewed annually (see fee schedule below). If you are no longer conducting business within the Village boundaries, the Village must be notify in writing.

### Checklist:

|                                    |  |
|------------------------------------|--|
| Sign Plan                          |  |
| Parking Plan                       |  |
| Licence Fee (Receipt Attached)     |  |
| Links to all online advertisements |  |
| Proof of Insurance                 |  |
| Proof of Principal Residence       |  |
| Proof of Ownership                 |  |

### BED & BREAKFAST BUSINESS LICENCE FEE SCHEDULE

|   |          |
|---|----------|
| Annual Business Licence Fee                                 | \$150.00 |
| Fire and/or Building Inspection (if applicable) Minimum Fee | \$50.00  |
| Administrative Change Fee:                                  | \$25.00  |

Business Licence Renewal Penalty:  
 Late Business Licence Renewals will be subject to a 100% penalty

## BED & BREAKFAST BUSINESS LICENCE APPLICATION

I understand and will abide by the following provisions for bed & breakfast use as set out in the Village of Pemberton Zoning & Planning Bylaw No. 832, 2018, Section 224, which states:

*Where permitted in a zone, one (1) bed and breakfast use per lot is permitted in a detached dwelling subject to the following regulations:*

1. *The bed and breakfast use is accessory to the principal residential use, occurs in the principal residence of the land owner, and is operated by a full-time and present resident;*
2. *A maximum of two (2) bedrooms in a detached dwelling are used for bed and breakfast;*
3. *One (1) additional parking space per bedroom rented out as bed and breakfast is required; and*
4. *A bed and breakfast use cannot be combined with any other home occupation.*
  - (a) *The area designated for bed and breakfast use (including guest rooms and any common room provided outside of the residential occupant's personal area) must not contain cooking facilities or refrigerators in excess of six (6) cubic feet.*
  - (b) *A bed and breakfast shall not be combined with any other tourism accommodation use.*
  - (c) *A valid Village of Pemberton business license is required.*

\_\_\_\_\_  
*Name of Applicant*

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_, 20\_\_\_\_\_  
*Date*



## MUNICIPAL BUSINESS LICENCE APPLICATION – FORM E Business Service Listing

Thank you for your Business Licence Application. One of the added benefits to your Business Licence is a listing in the Village’s online Business Directory. With our recent website upgrade, businesses can now include their logo on their listings.

Should you wish to have your logo in your listing, please email a jpeg (72 dpi) to [admin@pemberton.ca](mailto:admin@pemberton.ca)

Take your time when completing this form as the information below will appear on online Business Directory **exactly** as provided.

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ Mobile: \_\_\_\_\_

\_\_\_\_\_ Fax: \_\_\_\_\_

Website: \_\_\_\_\_ Email: \_\_\_\_\_

**CATEGORY (Circle up to four):**

- Accommodations     Accounting     Adventure, Recreation & Tours     Animal Services & Supplies
- Auto & Towing     Building & Construction     Childcare     Cleaning     Computers
- Consulting     Counselling     Communications & Marketing     Dining     Garden & Landscape
- General Contractor     Health & Fitness     I.T.     Medical & Dental     Merchants & Retail
- Real Estate & Property Management     Recycling     Services     Storage     Trade Contractor
- Other: \_\_\_\_\_

**BRIEF DESCRIPTION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The following information is for office use only and will not be included in the listing (please print):

\_\_\_\_\_, 20\_\_\_\_  
*Name of Applicant*                      *Signature of Applicant*                      *Date*

Position with Company: \_\_\_\_\_

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**For office use only**

Date Entered on Website: \_\_\_\_\_ By: \_\_\_\_\_

## MUNICIPAL BUSINESS LICENCE APPLICATION – FORM F

### Sign Permit Application

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicants Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ Cell: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

Proposed location of sign on building: \_\_\_\_\_

Type of sign: \_\_\_\_\_ Size of sign: \_\_\_\_\_

Sign is to be:       New                       Altered                       Moved                       Old

Please include the following with this sign application:

- a) Drawing(s) to scale for each side of the sign, giving all pertinent dimensions as well as the colour scheme, materials, copy and type face, and
- b) details of any surrounding framework; and
- c) large scale drawing(s) or photograph(s) showing the position of the sign painted on or attached to the building or structure together with the location of any existing signs; and
- d) a drawing showing details of the method and type of wiring, illumination (If any) and attachment to the building; and
- e) for freestanding signs, a drawing to scale showing the location on the parcel relative to the parcel lines, building's and adjacent streets, together with existing and proposed landscaping.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Manufacturer: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ Cell: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

Name of Installer/Contractor: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ Cell: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

NOTES: \_\_\_\_\_ Fee Amount: \$ \_\_\_\_\_

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Compliance Officer Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# MUNICIPAL BUSINESS LICENCE APPLICATION

## For Office Use Only

Application Fee Received\* \_\_\_\_\_  
*\*Attach copy of Receipt* *Received by* *Received on*

| Department                               | Report Required?             | Signature                   | Date  |
|--|------------------------------|-----------------------------|-------|
| Fire Inspector                           | <input type="checkbox"/>     | _____                       | _____ |
| Building Inspector                       | <input type="checkbox"/>     | _____                       | _____ |
| Planning                                 | <input type="checkbox"/>     | _____                       | _____ |
| Vancouver Coastal Health                 | <input type="checkbox"/>     | _____                       | _____ |
| Public Works Department Review Required? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |       |

Notes:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Authorized for Issuance:

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
*Compliance Officer Name* *Compliance Officer Signature* *Date*

| FOR OFFICE USE ONLY      |   |  |
|--------------------------|---|--|
| <input type="checkbox"/> | Business Licence Issued   | _____ <span style="margin-left: 150px;">_____</span><br><i>Issued by</i> <span style="margin-left: 150px;"><i>Issued on</i></span>     |
| <input type="checkbox"/> | Fee Refunded (if applicable)  | _____ <span style="margin-left: 150px;">_____</span><br><i>Refunded by</i> <span style="margin-left: 150px;"><i>Refunded on</i></span> |
| <input type="checkbox"/> | FORM E - Business Service Listing (if applicable) forwarded to Communications coordinator |  |