CHARLOTTETOWN

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HOME OCCUPATION APPLICATION

1. TYPE OF HOME OCCUPATION

☐ Home Daycare
☐ Catering (off-premises deliveries)
☐ Tourist Accommodations
☐ Custom sewing, crafts, or production of visual arts
☐ Multi-level marketing retail sales
☐ Home office, clerical, computer and/or telephone-based services

☐ Additional uses, including uses with appointments typically on an hourly basis or as scheduled, may be considered following the process of review for a Major Variance (*Please specify type of proposed home occupation):*

_____

2. CONTACT INFORMATION

APPLICANT

Name: _____ Address: _____
Phone: _____ Cell: _____
Email: _____ Postal Code: _____

OWNER

Name: _____ Address: _____
Phone: _____ Cell: _____
Email: _____ Postal Code: _____

3. PROVISIONS FOR HOME OCCUPATION

- It shall be located within an accessory building, single-detached dwelling, modular dwelling, semi-detached dwelling, or duplex dwelling.
- The total Floor Area used for the Home Occupation shall not exceed 25% of the Gross Floor Area of the Dwelling or up to 46.5 sq m (500 sq ft) within the Dwelling; or, when the Home Occupation operates from an Accessory Building, the Accessory Building shall meet the regulations for maximum Gross Floor Area permitted on the property.
- The proprietor(s) of the Home Occupation shall live in the Dwelling in which the Home Occupation is located.
- There shall be a maximum of one (1) full-time employee or two (2) part-time employees, other than the proprietor, working inside or outside of the Dwelling. The proprietor(s) shall not exceed these requirements by contracting work out to other persons (employees) not located in the Dwelling.
- There shall be no external storage of materials and no outdoor animal enclosures which would indicate that any part of the Dwelling or Lot is being used for any purpose other than a residential use.
- There are no other Home Occupations on the property or in the Dwelling.
- No more than one (1) commercial vehicle shall be parked or stored on the Lot, but notwithstanding the foregoing, other vehicles may be parked or stored on the Lot in a wholly enclosed Building.
- Parking and Signage shall be subject to the regulations of the Zoning & Development Bylaw.
- The maximum number of clients permitted on the premise of appointment-based home occupations at any one time will be determined by Council.
- If Alterations or Renovations are required for the operation of the Home Occupation the proprietor shall obtain a Building Permit before commencing operation of the Home Occupation.

4. PROJECT INFORMATION

Project Location/Address: _____

Type of Dwelling:
(no more than 2-units) _____

Answer the following questions with as much detail as possible. If more space is needed, use a separate sheet of paper and attach to this application form.

- What will be the nature of your business?

_____

_____

_____

_____

- How many employees will you have, including the owner of the business? _____
- What is the total floor area of your dwelling? _____
- What will be the total floor area that will be used for your business? _____
- How many parking spaces do you have? _____
- Is your property currently being used for any other uses besides a dwelling?

  ☐ No ☐ Yes, please specify: _____

- What will be your days and hours of operation? _____
- Will clients and/or customers visit your home? _____
- How many visits per hour or day are anticipated? _____
- Provide additional details if necessary:

_____

_____

_____

_____

_____

5. APPLICATION REQUIREMENTS

☐ Complete Project Information (Section 4)
☐ Floor plan of proposed home occupation (*including parking plan*)
☐ Home Occupation Fee of $50 *(No renovations) OR* $5.50 per $1,000 cost of construction, minimum $50 *(With renovations);* ***or***
☐ Home Occupation Fee of $50 *(No renovations) OR* $5.50 per $1,000 cost of construction, minimum $50 *(With renovations)* and additional $400 *(If a Major Variance is required)*

6. DECLARATION & SIGNATURE

I do solemnly declare & certify that the information and documents provided in this application are true and complete and are made with full knowledge of the circumstances connected with this Application.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

THIS IS AN APPLICATION ONLY

See Reverse for Additional Information