

Planning, Engineering and Development

Telephone: (709) 748-1000 E-mail: planning@mountpearl.ca Website: www.mountpearl.ca

BASED BUSINESS APPLICATION ΗΟΜΕ

CONTACT INFORMATION (To be completed by the applicant):			••• please print •••
Applicant: Mailing Address:		ty Owner(s): Address:	
Postal Code: Telephone: Home: Work: Cell:	Postal Teleph	Code: one: Home: Work: Cell:	
E-mail:	E-mail:		
APPLICATION INFORMATION (Attach add	ditional corresponder	ce, surveys, plans	, fees where required):
Location of property:			
Description of Home Based Business:			
Days and hours of business operations:			
Size of property: Frontage	DepthL	ot Area	(<u>Attach legal survey</u>).
Size of dwelling:	m² N	umber of storeys _	
Area occupied by Home Based Business (<u>Attach floor plan</u> illustrating location and dim Type of development: New Construction	nensions of home based	business within the	•••
Estimated cost of construction/ renovatio	n (if applicable) \$		
Will an accessory building and /or garage	be used for the busir	iess:	lo Yes
Do you propose to store goods/ equipmen location & size of storage area:		Yes If	yes, please indicate
# of on-site parking spaces:	# of Employee	s: Resident	Non-resident
Will people come to your home regarding	business? No	Yes If ye	es, visits per day.
Is signage proposed for the Home Based	Business? No	Yes If ye	es, please indicate
location & size of sign:			
DECLARATION: I hereby submit this appl confirm that the information supplied is co complete to the best of my knowledge. I as with all Municipal Regulations, the Nationa current edition, ancillary codes, agree to b with the plans approved by the City of Mon to commence building without applicable and permits from the City of Mount Pearl. NOTE: Where the Applicant and the Proper the same, the signature of the Property Ov before the application can be accepted for	orrect and gree to comply al Building Code, build in accordance unt Pearl, and not written approval erty Owner are <u>not</u> wner is required	 require a fee; ho will require a Co has an associate Rates and Fees Prior to formally advisable that th to review the ap to ensure that al supplied and to 	submitting an application form, it is a applicant set up an appointment plication with the Planning Division I required information has been facilitate application processing.
Applicant:			TAFF USE ONLY ••••
Date:		Date Fee(s) R	
Dresserie Aumor		Received By: Receipt #:	
Property Owner: Date:		File #:	
Date.			