



TOWN OF KINDERSLEY HOME-BASED BUSINESS APPLICATION

(This application is subject to Town of Kindersley Council approval)

1. APPLICANT: PLEASE PRINT

Application No. (HB #) _____

NAME: _____ Email: _____

Civic Address: _____ P.O.Box # _____ Postal Code _____

Phone #: Res: _____ Cell: _____ Work: _____ Fax: _____

2. PROPERTY OWNER Same as APPLICANT: Yes ; No

Property Owner NAME: _____ Email: _____

Civic Address: _____ P.O.Box # _____ Postal Code _____

Phone #: Res: _____ Cell: _____ Work: _____ Fax: _____

3. BUSINESS NAME / TYPE: (e.g., Day Care, Music Lessons etc.) (Describe services / products)

4. OTHER REQUIRED INFORMATION:

YES NO

4.1 Are there any other home businesses at this address? -----

4.2 Will the home business use more than 20% of the gross floor area? -----

4.3 Will the home business require any addition, alteration, or exterior remodeling? -----

4.4 Will there be any employees? If yes, how many? -----

4.5 Will there be any signs advertising the home business? -----

4.6 Will the home business create noise, vibration, smoke, dust, odours, heat, glare, electrical, television or radio interference detectable beyond the boundaries of the building containing the home based business? -----

4.7 Does your business require any licenses or certificates? (e.g., day care license etc.) -----

(If Yes, please attach copies of all required certificates and licenses for the business)

4.8 Estimated number of hours of operation each day/week? _____

4.9 What is the anticipated traffic to and from your business? _____

4.10 What is the expected number of daily customers? _____

5. DECLARATION OF THE APPLICANT:

I _____ of the Town of Kindersley in the Province of Saskatchewan solemnly declare that the above statements contained within this application are true, and I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath, and by virtue of the "Canada Evidence Act".

Date _____

Signature _____

***** **FOR USE BY TOWN OFFICE ONLY** *****

HB APPLICATION NUMBER: (HB #) _____

APPLICATION RECEIVED DATE: _____

HB APPLICATION FEE: \$ _____

FEE RECEIVED DATE: _____