

DEVELOPMENT PERMIT APPLICATION

- HOME-BASED BUSINESSES
- DAY HOMES
- BED & BREAKFAST

101 RANCHEHOUSE ROAD, COCHRANE, AB T4C 2K8
TEL: 403-851-2570 FAX: 403-932-2935
Email: planning@cochrane.ca
Website: www.cochrane.ca



FOR OFFICIAL USE

DP No. _____
FEE: _____
DATE PAID: _____
RECEIPT No. _____

1. NAME(S) OF APPLICANT (please print): _____

Mailing Address: _____

_____ Postal Code: _____

Phone 1: _____ Phone 2: _____

Email Address: _____

2. NAME(S) OF REGISTERED OWNER, if different from above: _____

Mailing Address: _____

_____ Postal Code: _____

Phone 1: _____ Phone 2: _____

Email Address: _____

3. LEGAL DESCRIPTION: Lots(s): _____ Block(s)/Unit(s): _____ Plan: _____

4. MUNICIPAL ADDRESS: _____

5. DETAIL:

a. Type of Business: Home-Based Bed & Breakfast Day Home

b. If applying for a Day Home, is it an: Approved Day Home through an Agency Private Day Home

c. Will equipment, goods or supplies related to the business be stored on the premises?

Yes No **If YES**, where will it be located _____

d. Describe the type of business and equipment that will be used in the business: _____

e. Floor Areas of your Residence:

Main floor (m ²)?	Second floor (m ²)?	Basement (m ²)?	Garage (m ²)?	Home-Based Business (m ²)?

f. Parking Requirements:

# of On-Site Employees:	# of Client Visits/Day:	# of On-site Parking Spaces:	Hours of Operation:
How many service / delivery vehicles will be coming to your residence?		Per Day:	Per Week:
Describe the make and model and GVW:			

g. Is this proposed business to be located within a **CONDOMINIUM PROPERTY**? Yes No

If YES, please be aware that *Condominium Bylaws* may apply.

h. Sketch of Area of Business – Please provide a detailed sketch outlining the building(s) and area(s) within the building(s) to be used in the operation of the business.

6. OTHER INFORMATION: Please provide any other pertinent information on separate sheet(s).

7. **APPLICANT(S) DECLARATION:**

I / We (please print), _____
have read the regulations and definitions regarding Home-Based Businesses, Day Home or Bed and Breakfast and am/are fully aware that any permit obtained by misrepresentation or default of any condition may result in revocation nor suspension of the issued permit.

Date Signed: _____ Signature: _____

Date Signed: _____ Signature: _____

8. **RIGHT OF ENTRY:**

I / We (please print), _____
being the registered owner(s) or person(s) in possession of the herein land and building(s) thereon, hereby consent to an authorized person designated by the Town of Cochrane entering upon the said property for the purpose of inspection during the processing of this application.

Date Signed: _____ Signature: _____

Date Signed: _____ Signature: _____

Compliance with the requirements of *Land Use Bylaw 01/2004* does not afford relief from compliance with the *Municipal Government Act*, R.S.A. 2000, CHAP M-26, or any other federal, provincial, or municipal legislation, or the conditions of any easement, covenant, building scheme, or agreement affecting the lands or buildings.

NOTE: This personal information is being collected under the authority of the *Municipal Government Act* and will be used in the processing of this application. It is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collecting of this information, please contact Planning and Engineering Services, 2nd Floor, Cochrane RancheHouse, 101 RancheHouse Road, Cochrane, AB, T4C 2K8, **403-851-2570**.

GENERAL REGULATIONS FOR HOME-BASED BUSINESSES

1. Most development permits will be granted on the basis of a "one-time" Application provided the use as approved has no changes.
2. A development permit does not exempt the applicant from complying with any other Federal, Provincial, or Municipal Legislation.
3. If, at any time, the permit holder does not comply with any of the requirements of a development permit or other Federal, Provincial, or Municipal provisions, the Development Authority may suspend or revoke that development permit.
4. A development permit is based solely on the location of the use. If a permit holder relocates within the Town and proposes to continue the business at the new location, that person must apply for a development permit for the new location.

INFORMATION REQUIRED TO ACCOMPANY THE COMPLETED APPLICATION FORM

1. **Application Form:** Be as detailed as possible and fill in all relevant "blanks". Use a separate sheet of paper for any additional information that you think is relevant.
2. **Site Plan:** A photocopy of your Real Property Report is acceptable. Draw on the location of all parking spaces.
3. **Floor Plans:** Floor plans of all levels of the building(s).
4. **Authorization:** A written letter of authorization signed by the registered owner(s) authorizing the proposed development or the signatures of all registered owners on the front of this form.
5. **Fee:** Home-Based Business, Day Home, Bed & Breakfast – \$250.
6. **Certificate of Title:** Can be obtained from any Provincial Registry office. Must be current & searched within 30 days of the date of application submission.

Questions? Please do not hesitate to contact planning staff at 403-851-2570

TOWN OF COCHRANE
DEVELOPMENT NOTIFICATION
SIGN APPLICATION FORM

FOR PARCELS/NON-RESIDENTIAL BAYS
 500M² OR LESS
 101 RANCHEHOUSE ROAD
 COCHRANE, AB T4C 2K8
 TEL: 403-851-2570 FAX: 403-932-2935
 Email: planning@cochrane.ca
www.cochrane.ca



1. Name(s) of Registered Owner: _____
2. Municipal Address: _____
3. Size of parcel or commercial/industrial bay (m²): _____
4. Proposed Development: _____
5. As the registered landowner of a parcel or non-residential unit less than 500m², do you consent to an authorized person designated by the Town of Cochrane entering the above-mentioned property for the purpose of erecting a Development Notification sign?
 - Yes
 - No
6. If yes, please indicate where on your property you prefer the sign to be placed? Please note the sign must be within 2m of your property line facing a public road.

7. Landowner(s) Authorization

_____	_____
Signature	Date
_____	_____
Signature	Date

For Office Use Only	
Date application was deemed complete:	
Date Notification Sign was placed on parcel:	
Date Notification Sign can be removed:	

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