



Section 1: Business Contact Information

Business Name:

Business Owner’s Name(s):

Location of Short Term Rental (include unit #):

| | | |
|-------|-----------|--------------|
| City: | Province: | Postal Code: |
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Mailing Address (if different from above):

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|-------|-----------|--------------|
| City: | Province: | Postal Code: |
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| | |
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| Phone: | Email: |
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Section 2: Short Term Rental Information

Zone Code: C5 C6 CD 2 CD 7

Number of Bedrooms to be rented: 1 bedroom 2 bedrooms 3 bedrooms 4 bedrooms

Section 3: Business Licence Fee

Municipal Business Licence Fee

TIER 1 Full year: Jan 1 – Dec 31, \$60 After Apr 1, \$45 After July 1, \$30 After Oct 1, \$15

This form is an application only. Business operation is not permitted until this application has been approved by a Business Licensing Officer. Application processing time can take 2-6 weeks.

Section 4: Signature

- I understand that the granting of a business licence is dependent on being in compliance with the Bylaws of the City of West Kelowna and that the proposed business would not be carried out in contravention of the *Criminal Code* or the *Controlled Drugs and Substances Act*.
- I undertake, if granted the licence applied for, to comply with each and every obligation contained in the Bylaws now in force or which hereafter come into force in the City of West Kelowna.
- I understand that licenses are automatically renewed, and applicable fees are charged. Should I choose to no longer operate this business, it is my responsibility to advise the City of West Kelowna, in writing, to cancel the business licence prior to December 31.
- I will provide written notification to the City of West Kelowna of any name, address, or ownership changes.

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| Signed: | Dated: |
|---------|--------|