183037 RR145 (Box 130), Brooks, AB T1R 1B2
Office Hours: Mon-Fri 8:00 a.m. – 4:30 p.m.
Email: development@newellmail.ca
Web: www.countyofnewell.ab.ca
Phone: 403-362-3266

Permit No.

FORM A1: HOME BASED BUSINESS 2 APPLICATION

A completed **Development Permit Application** *must be submitted in addition to this form.*

1. APPLICANT INFORMATION

Applicant Name:

2. DEVELOPMENT INFORMATION

a. Is there a Home Based Business currently operating on the site?

☐ Yes ☐ No

If yes, what is the nature of the Home Based Business and associated development permit numbers:

_____

b. The proposed new Home Based Business will be:

☐ On-site ☐ Off-site/Mobile

Describe the business, including the goods and/or services to be provided, and the other locations if off-site/mobile:

_____

_____

_____

_____

c. The proposed new Home Based Business will operate:

☐ In the dwelling ☐ In an accessory building

If the business is in the dwelling, attach a floor plan showing which rooms the business will use in its operation.
☐ Attached floor plan Date: _____

d. Operating Information:

Number of days per week: _____, from _____ to _____ (hours)
Number of resident employees: _____ Non-resident employees: _____
Anticipated customer visits: _____ per day/week/month (circle one)
Number of parking spaces for clients, employees, and deliveries _____
(show parking area on the Development Permit site plan with dimensions and number of stalls)

e. Are there any commercial vehicles/trailers that will be used in conjunction with the business?

☐ Yes ☐ No

If yes, describe the number, type and size of all applicable vehicles/trailers:

_____

_____

_____

f. Are outdoor storage areas required?

☐ Yes ☐ No

If yes, describe what is to be stored and show location(s) on the Development Permit Application site plan:

_____

_____

g. Are flammable or hazardous materials used for the business?

☐ Yes ☐ No

If yes, list the type and quantity to be stored:

_____

_____

h. Are signs being installed for the business?

☐ Yes ☐ No

If yes, complete *Form A3: Sign Application* and show on the Development Permit Application site plan:

_____

_____

3. DECLARATION OF APPLICANT / REGISTERED OWNER

The information given on this form is full and complete and is, to the best of my knowledge, a true statement of the facts in relation to the application for a Home Based Business 2. I consent to an authorized person designated by the municipality to enter upon the subject land and buildings for the purpose of an inspection during the processing of this application.

Date: _____ **Applicant Signature:** _____

Registered Owner: _____
(Required, if different from applicant) Print Name Signature

OR

☐ Written approval has been submitted by the registered owner stating that the applicant is authorized to sign the application form.

Date written approval was submitted: _____

Collection Statement: The personal information on this form is authorized under Section 683 of the Municipal Government Act and Section 4 (a) of the Protection of Privacy Act, and it will be protected by section 10 of the Protection of Privacy Act. The information collected will be used to process the home-based business application, prepare referral notifications if needed, and to contact the applicant when required. The name of the applicant and nature of the application may be included on reports provided to the municipality or made available to the public as required or allowed by legislation. Please direct any questions about this collection to the Privacy Officer for the County of Newell at 403-362-3266 or administration@newellmail.ca.