



SHORT TERM RENTAL BUSINESS LICENCE APPLICATION

PROPERTY DETAILS -Proof of primary residency and one additional piece of ID is required. *See Short-Term Rental Guide for a list of acceptable IDs.		
Property address:	Start date:	
SHORT-TERM RENTAL TYPE – Please refer to Zoning Bylaw for maximum number of permitted guest rooms and guests.		
<input type="checkbox"/> Entire Dwelling <input type="checkbox"/> 1 bdrm <input type="checkbox"/> 2 bdrm <input type="checkbox"/> 3 bdrm <input type="checkbox"/> 4 bdrm	<input type="checkbox"/> Secondary Suite <input type="checkbox"/> 1 bdrm <input type="checkbox"/> 2 bdrm	<input type="checkbox"/> Carriage House <input type="checkbox"/> 1 bdrm <input type="checkbox"/> 2 bdrm
ADDITIONAL INFORMATION – PARKING REQUIREMENTS		
An additional parking space is required per guest booking. Is a plan illustrating this requirement included?		<input type="checkbox"/> Y
If this is a strata unit, is strata council or strata president approval included?		<input type="checkbox"/> Y
PROPERTY OWNER INFORMATION - List all registered property owners.		
Name:	Email:	Phone:
Name:	Email:	Phone:
SHORT TERM RENTAL OPERATOR* INFORMATION – If different from Property Owner Information.		
Name:	Email:	Phone:
* If you are not the property owner, please provide a Home-Owner Authorization signed by the property owner (s).		
BUSINESS NAME INFORMATION – As it will appear on the business licence.		
Business name:	Business email:	Business phone:
APPLICANT’S ACKNOWLEDGEMENT		
<p>I/we understand that all information requested is necessary in order to fully evaluate and process the application and that an application submitted without the required information may not be processed. Completion of the application form and submission of supplemental information does not guarantee approval, as such, operation should not commence until the business licence has been issued.</p> <p>I/we hereby make application for a business licence in accordance with the particulars as stated on this application and declare that the property is my/our primary residence and that the information on the application is true and correct. I/we also declare that I/we have read the Business Licence Bylaw and the Short-Term Rental Operator’s Guide and undertake to ensure compliance with all bylaws of the City of Nanaimo and all other laws now in force or which may hereafter come into force.</p> <p>Signature: _____ Date: _____</p> <p>Signature: _____ Date: _____</p> <p>Service and Resource Centre, 411 Dunsmuir Street, Nanaimo, BC or by mail at 455 Wallace Street, Nanaimo, BC V9R 5J6. If you have any questions, please feel free to contact us at 250-755-4482 or business.licence@nanaimo.ca</p>		
Primary residency confirmed and ID verified by:		
APPROVAL DATE	BUSINESS LICENCE INSPECTOR	