



BL# _____

**Application for Approval of a Home-Based Business
in UBC Point Grey Campus Neighbourhoods**

This form is to be completed by the applicant who will **be doing business from a residence located within a UBC Point Grey campus neighbourhood only**. (Please print)

Please indicate if you are: **Owner** or **Tenant** **of the property**

Name: _____

I am applying to carry on the business of:

Type of Business: _____
Business known as: _____

In my place of residence:

Address (incl. postal code): _____
Phone (daytime): _____ Email: _____

This application verifies that I do not require a space in a commercial building to carry on this business and wish to use my place of residence as my business address. **Home-based business** means a craft or occupation conducted as an accessory use subordinate to the principal residential use of a dwelling unit (resident), and must only be conducted within the principal building on the site.

The following conditions also apply:

- 1. Home-based businesses allows portion of the residence to be used for a craft and/or occupation for administration purposes only (mailing and telephone).**
- 2. No clients are permitted to attend the premise at any time.**
- 3. No employees are permitted to engage in the running of the business from this residence.**
- 4. No person other than one resident member of the family occupying the residence shall be engaged in the home-based business on the premises.**

Please continue application on reverse



THE UNIVERSITY OF BRITISH COLUMBIA

Campus and Community Planning

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- 5. No more than ONE (1) home-based business licenses shall be issued for one residence.
- 6. Where located in a residential building, there shall be nothing to indicate from the exterior of the dwelling unit or building that it is being used for any purpose other than its principal and approved residential use (no signage permitted).
- 7. No products or material shall be sold from or within the residence.
- 8. No products or material shall be stored inside and/or outside of the residence, or any accessory building on the property.
- 9. No offensive noise, odour, vibration, smoke, heat or other objectionable effect shall be produced.
- 10. The University, its servants, agents and representatives shall be entitled at all reasonable times to go upon the premises for inspecting the compliance of the above conditions and any applicable law, rules and regulations.

The specific location of the business within the premises is:

_____ *(For example: an office in the basement, a spare room on the second floor).*

I UNDERSTAND AND AGREE TO THE ABOVE NOTED TERMS, REGULATIONS AND CONDITIONS. IF I AM NOT THE OWNER OF THE DWELLING UNIT, I HAVE DISCUSSED AND RECEIVED PERMISSION TO OPERATE THE HOME-BASED BUSINESS FROM THE PROPERTY OWNER/MANAGER.

SIGNED: _____ DATE: _____

PLEASE PRINT NAME: _____

****PLEASE READ, SIGN AND RETURN THIS FORM****

THIS SECTION FOR C+CP USE ONLY

Date Application Received: _____

Business License Fee: \$ _____ Business License Type: _____

Payment by: cheque cash Date Payment Received: _____