TEMPORARY USE PERMIT FOR SHORT TERM RENTAL APPLICATION

PO Box 141, 400 Centre Road, Lions Bay, BC, V0N 2E0
P: 604-921-9333
reception@lionsbay.ca
www.lionsbay.ca

TEMPORARY USE PERMIT FOR SHORT TERM RENTAL INFORMATION

Application Type:

☐ New Temporary Use Permit (TUP) – Short Term Rental

☐ Renewal

Application Date: _____ Application Fee: $_____

---

1. Property Information

Civic Address: _____

Legal Description: _____

Parcel Identifier (PID): _____

Zoning: _____

---

2. Registered Owner Information

Owner Name(s): _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Email: _____

Agent Authorization Required: ☐ Yes ☐ No

---

3. Applicant Information (if different from Owner)

Applicant Name: _____

Company (if applicable): _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Email: _____

☐ Agent Authorization Form Attached

PO Box 141, 400 Centre Road, Lions Bay, BC, V0N 2E0
P: 604-921-9333
reception@lionsbay.ca
www.lionsbay.ca

4. Short Term Rental Details

Describe the proposed Short Term Rental details:

Entire house to be rented? ☐ Yes ☐ No

Portion of house to be rented? ☐ Yes ☐ No (if yes, please describe, i.e. how many bedrooms, a secondary suite, etc. If necessary, attach a floor plan to illustrate the portion of the house):

Describe the proposed duration of use, i.e. 1 week per year, weekends only, etc.:

5. Parking

A minimum of **two (2) off-street parking spaces** must be provided.

Number of off-street parking spaces available: _____

PO Box 141, 400 Centre Road, Lions Bay, BC, V0N 2E0
P: 604-921-9333
reception@lionsbay.ca
www.lionsbay.ca

6. Applicant Declaration

I certify that the information provided in this application and any attached documentation is true and complete.

Applicant Name(s): _____

Signature: _____ Signature: _____

Date: _____

---

7. Reconsideration by Council

A decision of the Chief Administrative Officer to approve or refuse a Temporary Use Permit may be reconsidered by Council if the Owner submits a written request within **30 days** of receiving the decision in writing, in accordance with **Council Procedures Bylaw No. 476, 2015, as amended.**

---

8. Freedom of Information and Protection of Privacy Act (FOIPPA)

Personal information collected on this form is collected for the purpose of processing this application under the authority of the *Local Government Act* and Village bylaws. Questions about the collection or use of this information may be directed to the Village of Lions Bay.

TEMPORARY USE PERMIT FOR SHORT TERM RENTAL APPLICATION

PO Box 141, 400 Centre Road, Lions Bay, BC, V0N 2E0
P: 604-921-9333
reception@lionsbay.ca
www.lionsbay.ca

For Office Use Only Permit #: TUP_____

Application Received Date: _____

Date Application Fee Paid: _____ ☐ Cheque ☐ Debit ☐ ePay

Neighbour Notification Sent: _____

Comment Period End Date: _____

CAO Decision:

☐ Approved
☐ Approved with Conditions
☐ Refused

Decision Date: _____

Security Deposit Received (if applicable):

☐ Yes
☐ No

Staff Name: _____

Notes / Conditions: