

Application Form

Home Based Business Application

Date of Application (mm/dd/yy): _____

Business Information (Please Print Clearly)

Business Name: _____

Address: _____
Street # Street Name Postal Code

Business Phone: _____ Fax: _____ Home Phone: _____

Email Address: _____ Website: _____

Business Owner/Contact: _____
First Name Last Name

Business Description (Please Print Clearly)

(a) Please describe in your own words the primary function of your business. What goods or services are provided?

(b) What will the days of operation be? Mon-Fri 7 days/wk 24x7 Part-time Other

(c) In what manner will your clients receive your services (e.g. telephone, in person, mail, internet, fax, etc.)?

(d) Will you have clients or customers coming to your residence?

- Yes
 No

If yes, approx. how many per week? _____ How many at one time? _____

(e) Are you the owner of the property where the Home Based Business is to be located?

- Yes
 No

If No, attach a letter of consent from the property owner

(f) What equipment materials and goods are required to operate the business?

(g) How much space is required to store the equipment, materials, goods?

(h) Where are the equipment, materials and goods stored? _____

(i) How many persons are employed by the business (include yourself)? _____

(j) Will materials be delivered to your home? Yes No

If yes, please describe how and in what quantity?

(k) What is the floor area of your home? _____

(l) Which room(s) will be used to conduct the home based business and what is the approximate floor area to be used?

(m) Do you operate a commercially licensed vehicle in connection with your business? Yes No

What type and size (length & weight) of vehicle? _____

Where is it kept? _____

(n) Will neighbours or pedestrians hear any equipment being used? Yes No

(o) Will neighbours or pedestrians see equipment or materials used in your business? Yes No

(p) Will neighbours or pedestrians detect any odour, see smoke or feel vibrations due to the business?

Yes No

(q) Will the equipment used in the business interfere with neighbours' electronic equipment? Yes No

Declaration of Applicant

I hereby make application under the provision of the Town of Gander Home Based Business Regulations, to develop in accordance with the information submitted, which form part of this application. I understand and acknowledge the conditions and limitations applying to the issuance of a development permit.

Applicant's Signature

Date

For Office Use Only:

Approved Not Approved

Development Officer

Date

Department of Economic Development

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