



TOWN OF GIBSONS Appendix A

PO Box 340
474 South Fletcher Road
Gibsons BC | VON 1V0
T 604-886-2274
F 604-886-9735

Short-Term Rental Accommodation Business Licence Application

This application **must** be completed in full.

You can email your completed application and supporting documentation to planning@gibsons.ca or mail it to the above address.

1. Owner Operator / Tenant Information:
Name: _____
Mailing Address: _____
Email: _____ Phone Number: _____
Business Operating Name (if applicable): _____
Please attach documents of Incorporation and Notice of Articles if you are using a company name (photo copies accepted)
2. Short-Term Rental Address:
Address: _____ Postal Code: _____
Unit Number (if applicable): _____
3. Property Zoning
Zone: _____
4. Is this your principal residence? (Residential address and specific unit where you live and use for bills, identification, taxes, and insurance.)
Yes No
If 'Yes', please attach two items verifying principal residence to confirm this declaration (Proof of principal residence must include a scanned copy of government issued photo identification. Examples of acceptable proof of residence include a recent utility bill, drivers licence or any mail from Medical Services Plan or Canada Revenue Agency.)
5. Do you own this residence? (Please include ownership confirmation documentation, BC Assessment, Homeowner Grant, or statement of title).
Own Rent
6. If you rent the above address, do you have the permission from the legal owner to operate a short-term rental?
Yes No
If 'Yes', please attach your signed Owner Consent Form to confirm this declaration

<p>7. Do your strata bylaws allow short-term rentals?</p> <p>Yes No There is no strata council for this residence</p> <p>If 'Yes', please attach your signed Strata Council Consent Form to confirm this declaration</p>
<p>8. Have you previously held a Business Licence for a vacation accommodation or B & B at this address?</p> <p>Yes No</p> <p>Business Licence Number (if applicable): _____</p>
<p>9. When the Owner / Tenant is not available, who will serve as the designated Responsible Person to operate as the primary contact for this short-term rental? (A person who, at all times 24hr/7 days that the short-term rental is operated, has access to the premises and authority to make decisions in relation to the premises and the rental agreement.)</p> <p>Name: _____ Email: _____</p> <p>Address: _____</p> <p>Phone Number: _____</p> <p>(The above Responsible Person has consented to the use of his/her contact information.)</p>
<p>10. Indicate how many bedrooms you are applying to use. (You must have required parking for approval).</p>
<p>11. Indicate how many parking spaces are dedicated to the short-term rental use. Please include your parking plan.</p> <p>12. Please include your signed Short Term Rental Accommodation self-assessment checklist and attestation form.</p>

The personal information collected on this form is done so pursuant to the [Community Charter](#) and/or the [Local Government Act](#) and in accordance with the [Freedom of Information and Protection of Privacy Act](#). The personal information collected herein will be used only for the purpose of processing this application or request and for no other purpose unless its release is authorized by its owner, the information is part of a record series commonly available to the public, or is compelled by a Court or an agent duly authorized under another Act. Further information may be obtained by speaking with the Town's Corporate Officer at 604-886-2274 or 474 South Fletcher Road, Gibsons.

Applications will not be processed unless all required documentation is attached.

Completion of this application does **not** guarantee approval of application. Approved licences will be issued **only** upon receipt of payment of the Short-Term Rental Business Licence fee and receipt of associated documentation. Operating a Short-Term Rental without a valid licence is an **offence** for which penalties are prescribed.

Important: Operator has read and agrees to comply with the Town's regulations and bylaws. Licences are effective from January 1st to December 31st of the Licence year, are non-transferable, and the licence fee(s) paid are non-refundable. Short-Term Rental Business Licence's **must** be re-applied for at the start of each year. **I understand I cannot commence business until such time as a Short-Term Rental Business Licence has been approved and issued.**

Operator's Name (Individual completing form): _____

Operator's Signature: _____ Date Signed: _____, 20____

Appendix B



Schedule E – Short-Term Rental Accommodation Attestation

Please return this form to the Town of Gibsons with your application via email beo@gibsons.ca or at 474 South Fletcher Rd, Gibsons, BC, V0N 1V0

Owner/Operator Name: _____

Address: _____

Phone: _____ Email: _____

Emergency Contact Name/Phone #: _____

Safety Measures:

- Smoke Alarms are installed and will be maintained.
- Fire Extinguisher is installed and will be maintained.
- Fire Safety Plan is posted and will be updated annually.
- Means of egress operable and unobstructed (bedroom doors & windows).
- Carbon Monoxide Alarms installed and will be maintained.
- Interior/Exterior passageways maintained free and clear of obstructions.

Terms and Conditions:

- An operator resides on-site and will be available during all guest stays.
- Not more than one (1) guest suite can be used for short-term rental accommodation on a property at a time.
- I will abide by the parking plan submitted with my application.
- I will include my Business Licence number in all advertising for a short-term rental accommodation.
- I will display a copy of the business licence and the Operator's name, phone number and email address in a prominent location on the property.
- I will keep a written record of all guest names and contact information.
- I will obtain insurance for the short-term rental accommodation.

I hereby attest that the above safety measures have been tested, inspected, and will continue to be maintained, and that I will abide by the terms and conditions listed above. Failure to adhere to these conditions may result in the business licence being suspended or revoked.

Signature

Date

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