



## TOWN OF GIBSONS

PO Box 340  
474 South Fletcher Road  
Gibsons BC | V0N 1V0  
T 604-886-2274  
F 604-886-9735

# Residential Guest Accommodation Business Licence Application

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

### Eligibility and Requirements

- Residential Guest Accommodation ("RGA", also known as short-term rental) in the Town of Gibsons is regulated by both the Zoning Bylaw and Business Licence Bylaw. These bylaws specify where RGA can take place, who can operate it, and under what conditions. Please read the RGA sections of these bylaws to ensure you are eligible to apply for a Business Licence before proceeding. Explainer materials are available at: [gibsons.ca/rga-applications](https://gibsons.ca/rga-applications)
- You'll need to submit the following documentation along with your business licence application:
  - ☐ Proof of Principal Residence (government ID and other proof described below)
  - ☐ Copy of property title (if you own the unit)
  - ☐ [Strata Consent Form](#) (if applicable)
  - ☐ [Owner/Landlord Consent Form](#) (if applicable)
  - ☐ [Parking Plan](#)
  - ☐ [Guest Safety Attestation](#)
  - ☐ [Fire Safety Plan](#)

You can email your completed application and supporting documentation to [planning@gibsons.ca](mailto:planning@gibsons.ca) or mail it to the above address.

#### 1. OPERATOR DETAILS

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

***\*Note that an RGA operator cannot be a corporation, society, company, or any other incorporated entity.***

#### 2. RESIDENTIAL GUEST ACCOMMODATION DETAILS

Street Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Unit Number (if applicable): \_\_\_\_\_

**Is this your Principal Residence?** (the meaning of this term varies by jurisdiction so please refer to <https://gibsons.ca/business/short-term-rentals/> and make sure you understand what it means in the Town of Gibsons)

- ☐ 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 at least one government-issued piece of photo identification. Additional proof of residence can include a second piece of photo ID, or a recent utility bill, vehicle registration, or mail from Medical Services Plan or Canada Revenue Agency.

**Dwelling Type (please check only one)**

- ☐ Single family home  
☐ Duplex  
☐ Triplex or Fourplex  
☐ Garden Suite  
☐ Secondary Suite  
☐ Lock-Off Suite  
☐ Apartment or Condominium Unit  
☐ Townhouse Unit

Please provide a short description of the unit that you wish to use for RGA:

*NOTE: If you require more space, please attach additional pages to your application.*

**Have you previously held a Business Licence for a B&B or boarding house at this address?**

- ☐ Yes  
☐ No

Business Licence Number (if applicable): \_\_\_\_\_

**3. LICENCE TYPE**

**Please select a Licence Type** (you may select both if you wish to licence both types of RGA in the same dwelling unit, in which case additional fees will apply)

- ☐ Entire Unit. This type of licence is for renting an entire dwelling unit; you are allowed to operate an entire unit RGA for 3 consecutive calendar months in the same calendar year.

Please indicate your desired month(s): \_\_\_\_\_

- ☐ Partial Unit. This type of licence is for year-round rentals of shared or private rooms in your principal residence while you are present. You can rent up to two bedrooms at a time.

#### 4. PERMISSIONS

Do you own or rent this dwelling unit?

- ☐ Own  
☐ Rent

If you own the dwelling unit, please attach:

- A copy of the property title
- A signed [Strata Consent Form](#) (if the dwelling unit is, or is in, a strata lot or unit)

If you rent the dwelling unit, please attach:

- A signed [Owner/Landlord Consent Form](#)

#### 5. PARKING

What is the maximum number of bedrooms you will be operating as Residential Guest Accommodation: \_\_\_\_\_

You must attach a signed [Parking Plan](#) that assigns sufficient parking spaces for the number of bedrooms used as RGA.

#### 6. GUEST SAFETY

You need to have a set of basic safety measures in place to protect your guests. Please attach a signed [Guest Safety Attestation](#) and [Fire Safety Plan](#).

#### 7. DESIGNATED RESPONSIBLE PERSON

A designated responsible person is someone who, on days that the residential guest accommodation is operated, has 24/7 access to the premises and authority to make decisions in relation to the premises and the rental agreement, and who is available to attend the unit within 30 minutes of a complaint related to safety or guest disturbance.

For **partial unit licences**, the designated responsible person must be the residential guest accommodation operator.

For **entire unit licences**, the designated responsible person can be anyone over 18, including a property management company.

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

- ☐ The above Responsible Person has consented to serve in this capacity, and to the use of their contact information.

Please note that a secondary suite or garden suite must be a legal, permitted unit before it can be used as an RGA. If your secondary suite or garden suite is not yet legally recognized by the Town of Gibsons, you must first obtain a building permit for the dwelling unit before applying for a TUP to operate an RGA.

For information about options for legitimizing use of an accessory building as a garden suite, please contact the Planning Department and/ or refer to the Garden Suite Development Guide.

*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 Residential Guest Accommodation Business Licence fee and receipt of associated documentation. Operating a Residential Guest Accommodation 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 only effective for the period granted, are non-transferable, and the licence fee(s) paid are non-refundable. Residential Guest Accommodation licences must be re-applied for each calendar year. **I understand I cannot commence business until such time as a Residential Guest Accommodation Business Licence has been approved and issued.**

\_\_\_\_\_  
Operator Name (please print)

Date Signed: \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Operator Signature

-----  
**OFFICE USE ONLY**

APPROVED

Date:

Fee Amount:

Class Code:

Licence number:

Conditions of approval:

NOT APPROVED

Date:

Reason:

Date Referred to Council:

Decision:

\_\_\_\_\_  
LICENCE INSPECTOR Signature

(Signature constitutes authority to issue licence)