

Retail Cannabis Sales Business Licence Application

Businesses operating in Parksville are required to have a valid business licence. Information requested in this application is necessary to fully evaluate your request for a business licence. **Completion of this form does not guarantee approval of a business licence. BUSINESS SHOULD NOT COMMENCE PRIOR TO A LICENCE BEING ISSUED.**

- Licence fees apply to a calendar year January 1 to December 31.
- If the licence is approved, licence fees are not refundable.

Applicant/Primary Contact:

Applicant Name:	Business Telephone:
Company Name:	Email:
Address of Business:	
	Postal Code:
Mailing Address (if different than above):	
	Postal Code:
<p>* City staff work directly with and circulate information to the primary contact person. It is the responsibility of the primary contact person to forward information to consultants.</p> <p>** All written correspondence will be sent to the primary contact person by email. It is the primary contact's responsibility to ensure that the specified email account is regularly checked.</p>	

Submission Requirements:

The Retail Cannabis Sales Business Licence Application form must be completed in full with all required submissions attached. If any of the required submissions are not included, the application will not be accepted.

Additional information may be requested after application submission.

For an application to be considered complete, the following is required:

- A referral for a Cannabis Retail Licence from the Liquor and Cannabis Regulation Branch (LCRB). A City of Parksville Retail Cannabis Sales Business Licence Application will not be processed for private businesses until after a referral has been received from the LCRB.
- A City of Parksville Retail Cannabis Sales Business Licence Application with the following required submissions:
 - Application Fee (\$1,000); Council Resolution Fee (\$750) payable by cheque,
 - Completed Retail Cannabis Sales Business Licence Application form; with signatures from authorized property owner(s),
 - Title Search (dated within the past 30 days),
 - Charges on Title (legal notations, covenants, rights-of-ways, etc.),
 - Company Search (if property is owned in a company name),
 - Site Plan (one hard copy and one PDF digital copy in standard metric scale showing the extent of the retail cannabis business on the property and the business's primary entrance),
 - Annual Criminal Records Checks for owners, operators and all employees,
 - Odour Control Plan,
 - Good Neighbour Agreement,
 - Light Pollution Plan (for any hydroponic greenhouse facilities).

Property Information:

Civic Address: _____

Legal Description: _____

Parcel Identifier (PID): _____

Registered Owner(s) if different than applicant (all registered owners must be listed):

If there is insufficient space for property and/or registered owners, please attach separate list.

Telephone: _____ Email: _____

Mailing Address: _____

_____ Postal Code: _____

Existing Zoning: _____

Existing Use: _____

Proposed Operating Hours: _____

Authorization:

As the **registered owner(s) of/applicant(s)** for the subject lands, I/we submit this application for the development of the subject property and authorize the above noted applicant/primary contact to act as my/our agent in regard to this application. If there are any changes in ownership, applicant, title or charges, legal description, or development proposal while this application is pending, I/we will notify the business licence inspector in writing immediately. I/we have completed the above form and submitted all required documents, and certify the information contained herein is correct to the best of my/our knowledge. I/we understand that this application, including submitted plans/reports, are public information and may be reproduced for the purpose of application processing. I/we understand the personal information collected on this form is collected for the purpose of processing this application and for administrative purposes and is collected under the authority of the *Local Government Act*. **I/we provide authorization for City of Parksville staff to conduct an inspection of the subject properties, including buildings, and understand that the application may not be processed until the properties are in compliance with City bylaws. I/We further understand that I/We cannot commence business until such time as a business licence has been approved and issued.**

SIGNATURE OF APPLICANT/PRIMARY CONTACT	PRINT NAME(S)	DATE
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SIGNATURE OF PROPERTY OWNER/AUTHORIZED SIGNATORY	PRINT NAME(S)	DATE
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IF APPLICABLE, SIGNATURE PROPERTY OWNER/AUTHORIZED SIGNATORY	PRINT NAME(S)	DATE
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