



# CITY OF WEYBURN

## Home-Based Business Application

Application No.	File No.
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***Applicant (if different from owner – written approval  
From owner is required to accompany application):***

Name: \_\_\_\_\_  
Mail To: \_\_\_\_\_  
City/Prov: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_

***Owner (if different from applicant):***

Name: \_\_\_\_\_  
Mail To: \_\_\_\_\_  
City / Prov: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_

**Property:**

Address: \_\_\_\_\_  
Lot: \_\_\_\_\_  
Block: \_\_\_\_\_

Zone: \_\_\_\_\_  
Subdivision: \_\_\_\_\_  
Plan: \_\_\_\_\_

**Details of the Home-Based Business Proposed:**

Trade Name: \_\_\_\_\_  
Description of the home-based business: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Specific equipment to be used: \_\_\_\_\_  
Proposed Days / Hours of Operation: \_\_\_\_\_  
Location within the Dwelling: \_\_\_\_\_

**(must submit a floor plan on the reverse showing in scale the location with all dimensions as home-based businesses cannot occupy more than 25% of the gross floor area)**

Anticipated increase to traffic flow: \_\_\_\_\_

***I/We hereby acknowledge reading this application and state that the information contained herein is correct. I agree to comply with all City Bylaws and / or Provincial Regulations. I agree and understand that as a home occupation I am not permitted to have any paid staff or volunteers work for me, further that I shall obtain a City of Weyburn business license annually. I also agree to comply with all regulations and requirements as set out in Subsection 5.1.19 of Zoning Bylaw 2020-3412.***

\_\_\_\_\_  
Owner / Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Received by City Official & Date

\_\_\_\_\_  
\$250 Application Fee Received By: