



# Whitbourne Town Council Home Based/Mobile Business Permit Application

Business Name: \_\_\_\_\_ Applicant(s) Name: \_\_\_\_\_

Mailing \_\_\_\_\_ Mailing \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

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

Telephone: \_\_\_\_\_ Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Location of Property: \_\_\_\_\_

Description of Home Based/Mobile Business: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Days and hours of business operations: \_\_\_\_\_

Size of dwelling: \_\_\_\_\_ m<sup>2</sup> Number of storey's: \_\_\_\_\_

Area occupied by Home Based/Mobile Business (dedicated area or multi-purpose area of dwelling): \_\_\_\_\_ m<sup>2</sup>  
(attach floor plan illustrating location and dimensions of home based/mobile business within the dwelling).

The nature of the business:

Service  Light Industrial  Commercial

Will an accessory building and/or garage be used for the business? No  Yes

Will people come to your home regarding business? No  Yes  If yes, \_\_\_\_\_ visits per day.

Is signage proposed for the Home Based/Mobile Business? No  Yes  If yes, please indicate location & size of sign: \_\_\_\_\_

I \_\_\_\_\_ hereby make an application to operate a business under the above name in the Town of Whitbourne. I declare that all information is correct to the best of my belief.

Note: Where the Applicant and the Property Owner are **not** the same, the signature of the Property Owner is required **before** the application can be accepted for processing.