Development Permit Application

Applicant/Business Name:
Address: 7105-39A Street
Lot: 36 Block: 28 Plan: 092-178/
Tax Roll # 22165855000 Land Use District: R 1
PERMITTED Or DISCRETIONARY Application Fee: # 480 °
Invoice/Receipt # 915507 Method of Payment: M/C
HBB-Esthetics o
DP Application # 25-4644 DP #
NOD Issued Date: APPROVED or REFUSED
Development Officer Signature:
5-1 parking spots

Your personal information will be collected under the authority of Section 25 of the *Local Authority Freedom of Information and Protection of Privacy Act.* Information will only be used to administer the Business Licence application. If you have any questions about the collection please contact the Office of the City Clerk at 780-875-6184 or email cityclerk@lloydminster.ca.

Business Licence Application

BUSINESS LICENCE TYPE

The following questions will be used to determine the type of business licence you are applying for.

Will your business be located within the City of Lloydminster? *

Yes

C No.

Which of the following apply to your business? *



- Child Care Facility
- Not-for-Profit
- ← Farmers Market
- Mobile Vendor
- Pop Up Store
- Professional
- Youth Entrepreneur
- None of the above

PLEASE TELL US ABOUT YOUR BUSINESS

Please describe your business activity *

A certified practice providing hands-on service to Clients to improve neuromuscular integrity. Consisting of range of motion assessments, muscle testing, and muscle activations.

What industry does your company fall under: *

62- Health Care and Social Assistance

Does your business sell any of these products? (Check all that apply)

- ☐ Tobacco/Flavoured, Vapour Products Retailer
- ☐ Cannabis Retailer

Business Licence Application

BUSINESS CIVIC/OPERATING ADDRESS

Is your business incorporated? * ○ No ○ Yes		
Legal/Corporate Name *		
Operating/Trade Name (if different from above):		
Operating Address: *	City: *	Province/State: *
7105 39A Street	Lloydminster	AB
Postal Code: * Email: *		
Is this address a residential property in Lloydmin ○ Yes ○ No	nster? *	
Does the business have multiple physical location Yes	ons in the City of Lloydmir	nster? *
BUSINESS MAILING ADDRESS Is the mailing address the same as the physical a	address? *	
F Yes		

OTHER INFORMATION

C No

Business Start Date *		How long has your company been in business		
3/3/2025		(Years)? *		
		0		
Number of Full Time Employees (including owner): *		Number of Part Time Employees: *		
		0		
What is the square footage of the business?	*			
155				
Does your building/place of business have a below? Check those that apply.	ny of t	he following fire protection or door access outlined		
☐ A fire alarm system whose control features, that is located behind a locked panel	includir	ng those for emergency voice communication systems,		
☐ A fire alarm system in which manually opera	ated de	vices require a key or device in order to be reset		
☐ A fire alarm system in which the electrical ci				
☐ An automatic sprinkler system in which the				
		ontrol valve is located within a locked room or enclosure		
□ Firefighting standpipe and water supply con	nection	is that are in a locked room or area		
□ A key operated elevator control feature that	will per	mit excusive use of elevators by firefighting personnel		
□ A key operated elevator control feature that	will swi	tch selected elevators to operate on emergency power		

☐ Locked access doors to a roof provided for firefighting purposes

Business Licence Application

Development Permit Application

A Development Permit is required when the proposed use has never been approved or has expired at a specific address. All uses must comply with district regulations in Land Use Bylaw 5-2016 being the bylaw to regulate the use and enjoyment of the lands in the City.

Have you applied for a Development Permit? * ☐ Yes
€ No
Business Activity/Description *
Personal Services
PROPERTY OWNERSHIP
Is the address previously provided your primary residence? * • Yes • No
Are you the registered property owner or land owner? * • Yes • No
Is the property part of condo association? * • Yes • No
Is the property/land owned by a corporation? * C Yes No
Will the property be used for the exchange or sale of goods and services? ★ ○ Yes ○ No
Are there any other businesses operating at this address? * (Yes (No
Is there a secondary suite/rental unit on this property/land? * Yes

basement)? * Yes No	business occupy greatei	than	15% of the home-floor spac	ce (including the
GENERAL BUSINES	SS			
What days of the we ☑ Monday ☑ Friday	ek will your business op ☑ Tuesday ☑ Saturday	erate?	(Please select all that appl ド Wednesday ド Sunday	ly) * ☑ Thursday
Hours of Operation -	Business Open Time *		Hours of Operation - Bu	siness Close Time *
07:00 AM		0	07:00 PM	•
How many clients/cu	ıstomers per week will b	e com	ing into your property?*	
25				
Will you be erecting a CYes CNo	a sign for your office or l	ousine	ss on your property?*	
BUSINESS OPERAT	IONS			
Will your business be 「Yes のNo	e storing materials on the	e prop	erty?*	
Will you be using any office/administrative?		chiner	y to support your business	beyond
€ No				
Besides your own pe	rsonal vehicle, how man	y add	itional vehicles would be u	tilized by the business?*
0				

ect all that apply):
☐ Dating or Escort Services
☐ Automotive Service or Repairs
 ☐ Any Industrial Use including salvaging, recycling warehousing ☐ Storage of hazardous, noxious or dangerous goods
☐ Radio Transmission equipment
☐ Cannabis production, distribution, sales, or lounge
?*

You will require further evaluation with the Development Permit authority. Someone from the City of Lloydminster will contact you.





January 20, 2025

Property Owner

RE: Landowner Notification

Development Permit – Discretionary Use Development Permit Application No: 25-4644

Dear Property Owner:

Please take notice that a neighbor who is within a thirty (30) metre radius of your property boundary has submitted the following Development Permit Application for the purposes of a **Home-Based Business: Major (Esthetics – Muscle Therapy)** at **7105 – 39A Street** and it is being reviewed in accordance with Land Use Bylaw 5-2016.

Affected Address	Discretionary Use	Application #
7105 - 39A Street	Home-Based Business: Major	25-4644
Lot: 36, Block: 28, Plan: 092-1781	(Esthetics – Muscle Therapy)	

The City of Lloydminster's Land Use Bylaw 5-2016 grants the Development Officer the authority to consider the proposed use on this application. Any person that objects to the use may deliver to the Development Officer a written statement of their objections within fourteen (14) days of this letter indicating:

- Full name and address; and,
- Reasons for objection(s) to the proposed use.

Please note that a full name and address are required for submission of valid comment(s). If the submission is not accompanied by this information the written statement may be deemed invalid and rejected.

Written comments and general inquiries on the proposed use may be submitted by contacting:

Roxanne Shortt
City Operations Centre (6623 - 52 Street)

Phone: 780-874-3700 Ext 2608 Email: permits@lloydminster.ca

Additional information about the application can also be viewed on the City of Lloydminster website at:

www.lloydminster.ca/permits

To locate the information search under the Discretionary Permit and select the application number you wish to review.

If you have any questions, or require any clarification, please contact the undersigned at (780) 874-3700 or by email at permits@lloydminster.ca.

Sincerely, City of Lloydminster

Roxanne Shortt, ALUP Development Officer, Planning Operations Centre