Development Permit Application Application for Development Permit



Application Submission Date:

PROJECT	Is the project already constructed? Yes No	OFFICE USE ONLY		
	Municipal Address 4802 - 32 Street	Application # 25-4672		
	Tax Roll # Zoning District			
		Permit #		
APPLICANT	Applicant Name Jayd Fransus	Permit Fee \$480.00		
	Address 4802 32nd Street City Waydyinsty			
	Province Castletching Postal Code 59V1B3	Receipt # 982076 Approved by		
	Phone # 306-830-6292 Alt Phone # Email Jay e. (4 6) gmail or ,			
API	Are you also the property owner? Yes No	Refused by		
Ξ	(If property owner is different from applicant Owner Authorization Form is required)	Issue Date		
1000	Owner Authorization Form Attached? 🗖 Yes 🗖 No 👖 N/A	Valid Date		
Collected States	Development Class: CResidential Industrial Commercial Ir	stitutional 🗖 Multi-family - # of Units		
No.	Proposed Development: (Select all that Apply)	Discretionary Use Variance Application		
52	New Construction Front Deck			
TIO	Renovation Rear Deck Addition Other:			
DEVELOPMENT	□ Addition □ Other: □ □ Foundation □ Income Suite: □ Secondary to Home	e 🗖 Garage Suite 🗖 Garden Suite		
GRI	□ Superstructure □ Business License Use Approval for (type)			
NEV	New Dwelling	- point second second		
	Accessory Building Description of Home Business Nail Tellinguage			
and the second	Attached Garage			
ates at	Detached Garage	work identified in this application will be send used in		
I hereby declare I am I represent the owner of the property on which the work identified in this application will be accordance to the plans submitted, and upon approval will adhere to the conditions/terms of Land Use Bylaw 5-2016. I/				
ATI	accordance to the plans submitted, and upon approval will adhere to the conditions/terms of Land Use Bylaw 5-2016. I/We will no Development Authority of any proposed changes to the plans submitted with this application. Note: By typing your name into the signature box below (or by signing a printed version of this application), you agree that all information submitted on this form is true and accurate.			
AR	all information submitted on this form is true and accurate.	in this application, you agree that		
ECI				
0		Date of Application		
SE ONLY				
SION JSE OI				
DEC				
U,				
1	Development Officer	Date		
Municipal Governm	of Personal Information: The personal information being collected on this form is for the purposes of pro ent Act, and is protected by the privacy provisions of the Freedom of Information and Protection of Priva	acy Act (FOIP). The City will not share your personal information for		
purposes outside of those stated without your permission in writing, unless there is a specific exemption stated in the Municipal Government Act.				
IMPORTANT NOTICE: THIS APPLICATION DOES NOT PERMIT YOU TO COMMENCE CONSTRUCTION UNTIL SUCH TIME A DEVELOPMENT PERMIT HAS BEEN ISSUED BY THE DEVELOPMENT AUTHORITY AND ALL OTHER PERMITS (IF REQUIRED) ARE APPROVED. IF A DECISION HAS NOT BEEN ISSUED WITHIN 40 DAYS OF THE DATE THE APPLICATION IS DEEMED COMPLETE, YOU HAVE THE RIGHT TO FILE AN APPEAL TO THE SUBDIVISION AND DEVELOPMENT APPEAL BOARD. APPEALS TO THE SUBDIVISION AND DEVELOPMENT APPEAL BOARD CAN ALSO BE FILED IN REGARDS TO PERMIT REFLICANS AND/OR CONDUCTIONS WITHIN AS DAVE ON PORTURING AND DEVELOPMENT APPEAL BOARD CAN ALSO BE FILED IN REGARDS				
the reading and/or conditions within 21 days of a decision.				
6623 52 Street, Lloydminster AB/SK T9V 3T8 1 P: 780 874 3700 1 www.lloydminster.ca Email: permits@lloydminster.ca				

Home Office/Occupation Questionnaire Application for Development Permit



Date: Februry 2nd 2025

App

Pro

Mailing Address:	4802 32	nd Street	Lloydunster Sh
Lot	Block	Pla	n
Property Owner	Signature)		

Part 1 – General Information – CIRCLE YES or NO

1.	Does your office/business require you to perform duties other than paperwork in your home?	YES OR NO
2.	Will there be an office in your home that will be used for the exchange or sale of goods and/or services from the confines of your dwelling?	VES OR NO
3.	Is there a rental unit (secondary, garden or garage suite) in your primary dwelling or on your site?	YES OR NO
4.	Will any goods stored be viewed from the street of adjoining properties? If Yes, please provide a Site Plan indicating where goods will be stored on the property.	YES OR 10
5.	Will there be any structural, mechanical or electrical equipment used to carry on or support your business?	YES ORNO
6.	Will your office/business generate noise, vibration, smoke, dust, odor, heat or glare?	YES OR NO
7.	Will the business generate more vehicle or pedestrian traffic?	YES OR NO
8.	Besides your own personal vehicle, will there be vehicles/equipment utilized by the business?	YES OR NO
9.	Will there be clients, customers, students or animals coming into your home?	YES OR NO
10.	Will you hire staff other than those residing at this location?	YES OR NO
11.	Will you be erecting a sign for your office or business on your property?	YES OR NO
12.	Have you considered locating this Home Occupation to either a commercial or industrial zoned site?	YES OR NO
13.	Does the proposed occupation occupy greater than 15% of the homes floor space?	YES OF NO
	Have you attached owner authorization if you are not the sole property owner and/or you are a member of a Condo Association?	THES OR NO
15. I	Do you have or have you applied for a City of Lloydminster Business License?	YES OR NO
16. C	Do you reside (live) in the home?	YES OR NO

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Home Office/Occupation Questionnaire Application for Development Permit



Part 2 – Clarification

Office Use Only

DP #

1. In the space below please provide further clarification to any questions that were answered "YES" to on page 1

I Will Be performing Nail Services. The room Will be used for My Services. There					
Will be the Clients car in my drivening or on the steet. Clients will come					
into my home for services. I have applied for the business License. I live in					
the home of					
A					
Part 3 - Business/Office Details					
1. What is your business name? LUXe Beauty					

- 2. What type of business do you intend to operate? Nail enhancements Costonue Service
- 3. What services are you providing and/or what is being sold from your home? []ail enhancements
- Are there any other offices or businesses operating at this address? □ Yes X No
 If yes, describe _____
- 5. What is the total floor area (including the basement area) in square feet is your home?____
- 6. How much of the total floor area in square feet will be used for the office/business? $\frac{169}{169}$
- 7. What are the dimensions of the rooms used for your home office/business? $\underline{14}$
- 8. What days of the week will your business operate? Monday Sunday
- 9. Between what hours will your business operate? 5-9 Weilidays anything Saturday + Sunday
- 10. How many clients **per week** will be coming into your home? 1-b
- 11. How many client vehicles can be accommodated on your property (not including street parking)?

AUTHORIZATION:

I declare that to the best of my knowledge and ability, the information provided to be true and accurate

Feb very In//23

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February 4, 2025

Property Owner

RE: Landowner Notification Development Permit – Discretionary Use Development Permit Application No: 25-4672

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 – Nail Technician)** at **4802 - 32 Street** and it is being reviewed in accordance with Land Use Bylaw 5-2016.

Affected Address	Discretionary Use	Application #
4802 - 32 Street	Home-Based Business: Major	25-4672
Lot: 83, Block: 2, Plan: 71B 05699	(Esthetics – Nail Technician)	

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:

https://www.lloydminster.ca/business-building-development/planning-and-development/open-applications/

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