



Business Licensing Branch
1435 Water Street
Kelowna, BC V1Y 1J4
250-469-8617
kelowna.ca

Short-Term Rental Accommodation Business Licence Application

Application **must** be completed in full. You can email your completed application and supporting documentation to shorttermrentalapplication@kelowna.ca, or mail it to the above address or fax it to 250-862-3314. For information, or assistance completing this form, please contact the Business Licensing Department at 250-469-8617 or by email at businesslicences@kelowna.ca.

All related documentation and information is available online at kelowna.ca/business.

1. Owner Operator / Tenant Information:
Name: _____
Mailing Address: _____
Email: _____ Phone Number: _____
Business Operating Name (if applicable): _____
Please attach documents of Incorporation and Notice of Articles if you are using a company name (photo copies accepted)
2. Short-Term Rental Address:
Address: _____ Postal Code: _____
Unit Number (if applicable): _____
3. Property Zoning (confirm zoning of your address)
Zone: _____
4. Is this your principal residence? (Residential address and specific unit where you live and use for bills, identification, taxes, and insurance.)
Yes No
If 'Yes', please attach two items verifying principal residence to confirm this declaration (Proof of principal residence must include a scanned copy of government issued photo identification. Examples of acceptable proof of residence include a recent utility bill, drivers licence or any mail from Medical Services Plan or Canada Revenue Agency.)
5. Do you own this residence? (Please include ownership confirmation documentation, BC Assessment, Homeowner Grant, or statement of title).
Own Rent
6. If you rent the above address, do you have the permission from the legal owner to operate a short-term rental?
Yes No
If 'Yes', please attach your signed Owner Consent Form to confirm this declaration

7. Do your strata bylaws allow short-term rentals?		
Yes No There is no strata council for this residence If 'Yes', please attach your signed Strata Council Consent Form to confirm this declaration		
8. Have you previously held a Business Licence for a vacation accommodation or B & B at this address?		
Yes No Business Licence Number (if applicable): _____		
9. When the Owner / Tenant is not available, who will serve as the designated Responsible Person to operate as the primary contact for this short-term rental? (A person who, at all times 24hr/7 days that the short-term rental is operated, has access to the premises and authority to make decisions in relation to the premises and the rental agreement.)		
Name: _____ Email: _____ Address: _____ Phone Number: _____ (The above Responsible Person has consented to the use of his/her contact information.)		
10. Indicate how many bedrooms you are applying to use. (You must have required parking for approval).		
1 Bedroom	2 Bedrooms (Muti-family max.)	3 Bedrooms (Single-family or duplex max.)
11. Please include your signed Short Term Rental Accommodation self-assessment checklist and attestation form.		
12. Please include your parking plan.		
13. Please include your signed Short Term Rental Accommodation Good Neighbour Agreement.		

Applications will not be processed unless all required documentation is attached.

Completion of this application does **not** guarantee approval of application. Approved licences will be issued **only** upon receipt of payment of the Short-Term Rental Business Licence fee and receipt of associated documentation. Operating a Short-Term Rental without a valid licence is an **offence** for which penalties are prescribed. A person found guilty of an offence under this Bylaw is subject to a fine of not less than \$100.00 and not more than \$10,000.00 for every instance that an offence occurs or each day that it continues (Bylaw No. 11720 Sec. 8.).

Privacy Notification: This information is being collected for the purpose of determining the Operator's eligibility for a Short-Term Rental Business Licence in the City of Kelowna pursuant to its Bylaw(s). In providing this information, you have consented to its use for the above-described purpose and declare that all the information provided herein is correct. This information may be shared with applicable City of Kelowna departments and related agencies for the purpose of required inspections and approval of this licence application. The legislated authority to collect your personal information is Section 26 (c) of the *Freedom of Information and Protection of Privacy Act* and section 3 (2) of the *Short-Term Rental Regulation Bylaw*. If you wish to obtain further information regarding the collection of your personal information, please contact the Office of the City Clerk, 1435 Water St, Kelowna, BC V1Y 1J4 250.469-8465

Important: Operator has read and agrees to comply with the stated regulations and bylaws of the City of Kelowna, specifically including pertinent sections of the Zoning Regulation Bylaw (No. 8000) and the Short-Term Rental Accommodation Business Licence and Regulation Bylaw (No. 11720). Licences are effective from January 1st to December 31st of the Licence year and are non-transferable, and the licence fee(s) paid are non-refundable. Short-Term Rental Business Licence's **must** be re-applied for at the start of each year. **I understand I cannot commence business until such time as a Short-Term Rental Business Licence has been approved and issued.**

Operator's Name (*Individual completing form*): _____

Operator's Signature: _____ Date Signed: _____, 20____