



Making a difference...together

Juan de Fuca Community Planning

3 – 7450 Butler Road, Sooke, BC V9Z 1N1

T: 250.642.1500 F: 250.642.5274 E: jdfinfo@crd.bc.ca

www.crd.bc.ca

Folder No: _____
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LIQUOR LICENSE/CANNABIS RETAIL LICENCE APPLICATION

I/We, the undersigned, hereby make application to the Capital Regional District for consideration of a Cannabis Retail Licence or a Liquor Licence.

OWNER/APPLICANT INFORMATION

Name of Registered Land Owner(s): <i>(If more than two, please list on a separate page)</i>	1. _____
	2. _____
Name of Applicant:	_____
Applicant Contact Information:	
Mailing Address:	
Street: _____	City: _____
Province: _____	Postal Code: _____
Email: _____	
Tel (mobile): _____	Tel (home): _____
Tel (work): _____	

PROPERTY INFORMATION

Legal Description <i>(If more than two, please list on a separate page)</i>
PID: _____ Folio: _____
Lot: _____ Section: _____ Block: _____ Township: _____ Plan: _____
Land District: _____
Civic Address: _____
Current zoning: _____ Current OCP designation: _____
Parcel size: _____
Current Land Use: _____

COMMUNITY IMPACT STATEMENT

What is the market focus or target clientele of the proposed facility?
What is the rationale for the proposed location?
What are the proposed business hours of operation?



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What security measures are proposed/required for the facility?
Will the proposed operation be carried out in an existing building (<i>exterior alterations may trigger the requirement for a development permit and internal structural alterations will require a building permit</i>)?
Has a commercial access permit been issued by the Ministry of Transportation and Infrastructure? (<i>if yes, please include a copy of the permit</i>)
Provide the distance from the following uses: School: _____ Park: _____ Day Care: _____ Bus Stop: _____ Community Centre: _____ Residential Areas: _____ Liquor Primary Establishment: _____ Cannabis Retail Establishments : _____

CONDITIONS AND DECLARATIONS

<p>Waiver and Indemnity: I, the applicant and/or owner, assume all risks incidental to or that may arise as a result of this application and agree to save harmless and indemnify the Capital Regional District and its officials, agents, servants and representatives from and against all claims, actions, costs, expenses and demands with respect to death, injury, loss or damage to persons or property arising out of or in connection with this application. I agree to conform to all applicable bylaws. I understand that no warranty is implied for the approval of this application and that this waiver and indemnity is binding on me, my heirs, executors and assigns.</p> <p style="text-align: right;">I have read and agree with the above paragraph. _____ (initial)</p>
<p>Authorization for Access: I, the applicant and/or owner, hereby grant to the Capital Regional District and its officials, agents, servants and representatives, authorization to enter the land for the purposes of verifying site conditions as they relate to this application.</p> <p style="text-align: right;">I have read and agree with the above paragraph. _____ (initial)</p>
<p>Freedom of Information Waiver: Personal information contained on this form is collected under the authority of the <i>Local Government Act</i> and the Juan de Fuca Electoral Area Development Fees and Procedures Bylaw, Bylaw No. 3885, and is subject to the <i>Freedom of Information and Protection of Privacy Act</i>. Enquiries about the collection or use of information on this form can be directed to the Juan de Fuca Community Planning office.</p>

Registered Owner or Authorized Agent’s Signature <i>(If more than one owner, ALL owners must sign.)</i>	Date
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INFORMATION TO BE SUBMITTED AT THE TIME OF APPLICATION

- Completed application form
- Corporate structure and name of principal of company
- Copy of completed Liquor and Cannabis Regulation Branch application
- Written authorization from owner giving applicant permission to act on their behalf (*if applicable*)
- Written authorization from the Strata Corporation or written approval from the Strata owners (*for Licence applications related to Strata property only*)
- Copy of current Title Search (*dated within 30 days*)
- Copies of any easements, covenants and rights-of-way listed on Title Search
- Site Plan to include the following:
 - Property boundaries
 - Location and setback distance from property lines of the building out of which the cannabis retail/liquor use will be carried out
 - Location of existing and proposed parking spaces and access/egress
- Building Plans to include floor plan and dimensions
- Sign plan (*signs are to comply with applicable bylaw regulations*)
- Completed Community Impact Statement

APPLICATION FEES TO BE SUBMITTED AT THE TIME OF APPLICATION

- As per Bylaw No. 3885, Juan de Fuca Development Fees and Procedures Bylaw, Schedule B:
 - Cannabis Retail Licence application fee: \$1,500 (*payable by cash, cheque or debit card*)
 - Liquor Licence application fee: \$1,500 (*payable by cash, cheque or debit card*)



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Owner's Authorization Form

All property owners registered on the Certificate of Title must provide written approval to allow the APPLICANT to act on their behalf.

_____, is hereby authorized to act as my agent for the

(Name of agent)

purpose of _____

(You may list all application types associated with your project)

Subject Property: _____

PID (Parcel Identifier-nine digit number): _____

Legal Description: Lot _____ Block _____ Section _____ Plan _____ Except _____

REGISTERED OWNER 1

Name of Registered Owner: _____

Signature of Registered Owner: _____

Date: _____ Email: _____

REGISTERED OWNER 2

Name of Registered Owner: _____

Signature of Registered Owner: _____

Date: _____ Email: _____

REGISTERED OWNER 3

Name of Registered Owner: _____

Signature of Registered Owner: _____

Date: _____ Email: _____

REGISTERED OWNER 4

Name of Registered Owner: _____

Signature of Registered Owner: _____

Date: _____ Email: _____