APPLICATION FOR
ZONING (OCCUPANCY) CERTIFICATE
Planning Division – 200 King Street West, 6th Floor
P.O. Box 1118, Kitchener ON N2G 4G7
519-741-2426; planning@kitchener.ca

PURPOSE
A zoning (occupancy) certificate is required for any new use or change in type of use of a property, in accordance with the Ontario Planning Act and City of Kitchener Zoning By-law (referred to as Certificate of Occupancy).

Please allow 3 weeks for processing.

Email to: Owner □ Applicant □ (if you require alternate arrangements please contact our office)

1. APPLICATION FEES
Cash or cheque (payable to the City of Kitchener):
□ Regular - $161.00
□ Home Business (floor plan must be submitted with this application) - $79.00

2. BUSINESS OWNER
Name: ____________________________ Phone: ____________________________
Company: ____________________________ Extension: ____________________________
Street Address: ____________________________ Email: ____________________________
City/Province: ____________________________ Postal Code: ____________________________

3. APPLICANT (if other than business owner)
Name: ____________________________ Phone: ____________________________
Company: ____________________________ Extension: ____________________________
Street Address: ____________________________ Email: ____________________________
City/Province: ____________________________ Postal Code: ____________________________

4. PROPERTY INFORMATION
a) Name of business: ____________________________

b) Address of business (include unit # if applicable): ____________________________

c) Proposed use (include floor area breakdown – i.e. 25% office, 75% warehouse)
   ____________________________
   ____________________________

d) Number of employees (if manufacturing, total number of employees on the 2 greatest consecutive shifts):
   ____________________________

e) Number of individual service bays for motor vehicles inside building (NOT bay doors) (if within 14 metres of a residential zone, refer to Section 5.29 in General Regulations of Zoning By-law): ________

f) Number of motor vehicles on display for sale or lease (if applicable): ________

g) Date of commencement: ________

h) Please indicate as follows:  ☐ Expansion of existing business  ☐ New business
   ☐ Relocating from outside Kitchener  ☐ Relocating from within Kitchener
   ☐ Home business (owner must reside at address)  ☐ Residential
5. GENERAL INFORMATION

For additional information regarding the following, please contact the appropriate divisions as noted below:

- **Business License** – Inquire with the Corporate Services Department at 519-741-2275 (2nd floor, City Hall)
- **Building Permit** – May be required under the Ontario Building Code – contact the Building Division at 519-741-2433 (5th floor, City Hall)
- **Sign Permit** – Permit must be obtained before installation of any sign (fees will be doubled if permit not obtained before installation) – contact the Planning Division at 519-741-2200 x7075 (6th floor, City Hall)

STATUTORY DECLARATION

I, ________________________________________________, solemnly declare that:

a) I am the (please select):  □ property owner  □ applicant on behalf of property owner  
   □ business owner  □ applicant on behalf of business owner

b) I have personal knowledge of the particulars of this application

c) All the information and statements given with this application, drawings and specifications are true to the best of my knowledge and belief

d) I know of no reason why this Zoning Certificate should not be granted in pursuance of this application

e) I acknowledge that submission of this application does not guarantee approval and that no refunds will be issued if the application is withdrawn or refused.

I have read the above and make this solemn declaration conscientiously, believing it to be true, and acknowledge it is of the same force and effect as if made under oath and by virtue of the Canada Evidence Act.

Signature of Owner/Applicant: ________________________________  Date: ________________________________

STAFF USE ONLY

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Zoning: ________________________________  C of A Required?  Yes □  No □

Use: ________________________________  Parking Plan:  Submitted □  On File □

Parking Requirement: ________________________________  Regulations Met?  Yes □  No □

Site Plan Approval Required?  Yes □  No □  Building Permit Required?  Yes □  No □

Comments: ____________________________________________

__________________________________________

Parking on Site:  Used to  Date:  Required:  Remaining:  Reviewed By:  Date:

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