



STRA Variance/Appeal Application

Date Application Submitted:

Variance Application \$1,400.00

Appeal Application \$500.00

(Fees are non-refundable or non-transferrable)

Owner Information

Full Name:			
Address	Street Address	P.O Box	Apartment/Unit #
	City	Province	Postal Code
Home Phone	Business Phone		
Email			
Business Name (If Applicable)			

Applicant Information (if submitting on behalf of owner)

Full Name			
Address	Street Address	P.O Box	Apartment/Unit #
	City	Province	Postal Code
Primary Phone	Secondary Phone		
Email			

Declaration

I, _____ of the Town/City of _____

In the County/Region of _____ solemnly declare that:

I understand and acknowledge that submission of the application under Short-term Rental Accommodation By-law Number 2019-0061 (LI-3), does not guarantee that a licence will be issued under the By-law, and that the licenses will not be issued until all requirements of the By-law are fulfilled to the satisfaction of the Licensing Coordinator.

As of the date of this application, I have examined the contents of this application, I certify as to the correctness of the information submitted with the application insofar as I have knowledge of these facts, and I concur with the submission of this application to the Municipality.

All of the above statements and the statements contained in all of the exhibits submitted herewith are true and I make this solemn declaration, conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of the *Canada Evidence Act*.

Declared before me at the Town of _____, in the County/Region of _____

This _____ day, of _____, 20_____.

Signature of Applicant

Signature of Commissioner