Occupant Load Analysis Application Form For Liquor Licensing



1.	APPLICANT	Name:				
		Address:				
		Email:				
		Phone:				
2.	PROPERTY OWNE	R Name:				
		Address:				
		Phone:				
3.	SUBJECT PROPERT	FY Address:				
		Zone:				
4.	DESCRIPTION OF APPLICATION					
5.	SIGNATURES		DATE			
	Property Owner's Sig	gnature	OR	Authorized Agent's Signature		
	Print Name			Print Name		
6.	REQUIRED INFORMATION					
	a. Requested Occupant Load (include staff):					
	b. Present L.C.L.B. Patron Capacity (if applicable					
	c. Two copies of a professionally drawn floor plan to scale of the premises showing: Dimensioned floor areas with seating, furniture, fixtures, etc., patron capacity of occupant load for each load for each area; include patios if applicable, location, size and direction of all exists, all washroom facilities.					
	d. Plans showing existing floor plan with L.C.L.B. stamp is this is currently a licensed establishment.					
7.	NON-REFUNDABL	NON-REFUNDABLE APPLICATION FEE				
FO	R OFFICE USE ONLY	(circulate for Acceptance	and return to I	Plan Checker)		
Plan Checker				Date		
Development Planner				Date		
Ap	proved Occupant Lo	oad (not exceeding the maximum	n permitted by the	e BC Building Code):		
OL#:						