Form W1 - Occupant Load Analysis
Application Form For Liquor Licensing

1. APPLICANT
   Name: _____
   Address: _____
   Email: _____
   Phone: _____

2. PROPERTY OWNER
   Name: _____
   Address: _____
   Phone: _____

3. SUBJECT PROPERTY
   Address: _____
   Zone: _____

4. DESCRIPTION OF APPLICATION

   _____

5. SIGNATURES DATE _____

   _____ OR _____
   Property Owner's Signature *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.
   e. Does the building have a fire alarm system? _____

7. NON-REFUNDABLE APPLICATION FEE

FOR OFFICE USE ONLY (circulate for Acceptance and return to Plan Checker)

_____ _____
Plan Checker Date

_____ _____
Development Planner Date

Approved Occupant Load (not exceeding the maximum permitted by the BC Building Code): _____

OL#: _____

Application Centre, Development Department
Contact Us: 604-946-3380 or Development@delta.ca