

## SHORT-TERM RENTAL BROKERAGE APPLICATION FORM

### THE APPLICATION PROCESS

This package contains the necessary application and forms to obtain a **Short-Term Rental (STR) Brokerage** licence in the City of Vaughan (the City). To apply, persons must submit a completed application and pay the applicable fee as listed at <u>vaughan.ca/BusinessLicensing</u>, as amended. For more information, contact us:

**By-law and Compliance, Licensing and Permit Services Department, City of Vaughan** Vaughan City Hall, 2141 Major Mackenzie Dr., 1<sup>st</sup> floor, Vaughan, ON, L6A 1T1 Phone: 905-832-2281 | Email: <u>bylaw.licensing@vaughan.ca</u> Website: <u>vaughan.ca/BusinessLicensing</u>

Hours: Monday to Friday, 8:30 am to 4:30 pm, except for statutory holidays

How to apply

Applicants and licensees have four options for submitting new or renewal licence applications:

- Licensing Portal where you can apply online for and renew many licences, posted at vaughan.ca/BusinessLicensing. Note, you will not be required to complete this form if you apply using the portal.
- 2. Mail to the By-law and Compliance, Licensing and Permit Services Department.
- **3.** Drop off to drop-boxes located at the entrances of Vaughan City Hall, with the enveloped marked, "Attn: By-law and Compliance, Licensing and Permit Services".
- 4. By e-mail to <u>bylaw.licensing@vaughan.ca</u>, along with scanned copies of required documentation, and an e-mail indicating a contact phone number for staff to collect payment.

Who can submit the application and appoint an authorized agent

As per the table below, the following persons can submit an application. Note that an "authorized agent" may submit the application, provided that the person is given authorization through this application or <u>separate submission</u> of the Authorized Agent Form at <u>vaughan.ca/BusinessLicensing</u>.

Applicant	<ul> <li>Persons who can:</li> <li>1. submit the application; and</li> <li>2. who have the authority to appoint an authorized agent through submission of this form or the Authorized Agent Form</li> </ul>
Sole proprietorship	The sole proprietor
Partnership	A partner
Corporation	An officer or director



# THE APPLICATION

Section 1 - Applicant information				
The applicant is the entity seeking to be licens	ed.			
Registered business name			Type of applicant	
-	inoss Liconco)			
(as per Articles of Incorporation or Master Bus	siness Licence)		□ Sole proprietor	
Partnership				
			Corporation	
Operating business name (if different than reg	istered busine	ss name)		
Name of person submitting the application				
Name of person submitting the application				
Relationship to applicant				
□ Sole Proprietor □ Partner □ Officer □ Dire	ector 🗆 Author	rized agent	t	
Position of person submitting the application				
Business address (street no, street name)		Unit		
City	Province			
City	Province			
Country	Postal code/ zip code			
Business telephone number	Alternative telephone number			
Email address				
Mailing address (if different from above)				
		11.0.14		
Address (street no, street name)		Unit		
City	Province			
Country Postal code/zip code				
,		· · / ]· · · · ·		
Information about your business				
information about your business				



Which status applies to your business?	Anticipated start date of			
New business	operation (dd/mm/yy)			
Existing business with new owner				
Existing business starting operation in Vaugh	ian			
Section 2 - Canadian Residency Requirement				
Short-term rental brokerages are required to ha	ve nermaner	nt residency in Canada: below		
indicate which applies to you.	re permanen			
I am an individual and a permanent resident	of Canada.			
<ul> <li>We are a partnership and at least one partner</li> </ul>	er is a perma	nent resident in Canada or the		
partnership is incorporated in Canada.				
We are a corporation that is incorporated in				
None of the above (in which case you may n Declaration of the above (in which case you may n	-	for a Short-Term Rental		
Brokerage Licence; contact the City to verify	this)			
Section 3 – Authorized Agent				
This section should be completed if the applicar	it would like '	to appoint an agent to act on		
behalf on a business licence or permit applicant				
Name of authorized agent (first name, last name				
Business telephone number	Email addres	S		
What will the Authorized Agent do on behalf o	f the applica	nt?		
Select all activities that apply.				
Apply for a business licence or permit, include	ling payment			
Renew a business licence or permit, including				
Make and respond to inquiries with respect to the licence, permit or application				
Update information with respect to the licence, permit or application				
Cancel the licence, permit or application				
Other, as described here:				



#### Section 4 – Municipal Accommodation Tax

Those who operate Short-Term Rentals are required to remit Municipal Accommodation Tax (MAT) on all Short-Term Rental stays. To learn more and register to <u>www.vaughan.ca/mat</u>.

City of Vaughan Municipal Accommodation Tax Registration Number

#### Section 5 – Required documents

The following documentation must be submitted with your application.

be ha	<b>m</b> eck the box low if you ve included e item.	<b>Description</b> The description is based on the Licensing By-law, as amended, as listed at <u>www.vaughan.ca/bylaw</u> in the By-law Library.
	Canadian Government- Issued Identification List of Short-	Canadian government-issued identification which demonstrates the applicant is at least 18 years of age, and that a sole proprietor is a permanent resident in Canada, or that in partnerships, at least one partner is a permanent resident in Canada. This may be one or several pieces of identification. List of all Short-Term Rentals for at least the previous 7 days
	Term Rentals Proof of Insurance	Proof of general liability commercial insurance, or any other suitable insurance in the amount of at least \$2,000,000 on the City's standard Certificate of Insurance, linked to <u>vaughan.ca/BusinessLicensing</u> .
	Authorized Agent Identification (if applicable)	If the applicant would like to appoint an Authorized Agent, Section 3 must be completed and one piece of Canadian government-issued photo identification for the Authorized Agent must be submitted which demonstrates the Authorized Agent is at least 18 years of age.

#### Section 6 – Declarations

By signing below, the applicant certifies that:

- 1) The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true and accurate to the best of the applicant's knowledge.
- 2) The person submitting this application has the authority to bind the applicant.
- 3) The applicant acknowledges that the application may contain "personal information" as defined under the Municipal Freedom of Information and Protection of Privacy Act.



This information is required pursuant to the provisions of the Municipal Act. It will be used by the City of Vaughan to process this application, for administration of this licence and to ensure compliance with all applicable statutes, regulations and by-laws. Questions about this collection should be directed to the Chief Licensing Officer, Bylaw and Compliance, Licensing and Permit Services, City of Vaughan, 2141 Major Mackenzie Drive West, Vaughan, Ontario L6A 1T1, telephone number (905) 832-2281.

4) The applicant further agrees that any false information may result in refusal to issue, suspension, revocation or placement of conditions on any licence.

Signature of <u>at least one</u> of the applicant(s), such as the sole proprietor, partners, officers or directors

Note that only those applicants whose names and signatures are submitted below, will be authorized to manage the licence. If there are more than five applicants to be listed, you can include their names, signatures and the date of signatures on the back of this document.

Name of applicant 1	Signature of applicant 1	Date (dd/mm/yy)		
Name of applicant 2	Signature of applicant 2	Date (dd/mm/yy)		
Name of applicant 3	Signature of applicant 3	Date (dd/mm/yy)		
Name of applicant 4	Signature of applicant 4	Date (dd/mm/yy)		
Name of applicant 5	Signature of applicant 5	Date (dd/mm/yy)		
Signature of the authorized agent (if applicable)				
Name of authorized agent	Signature of authorized agent	Date (dd/mm/yy)		

For office use only	
Reviewed by the following staff:	
Notes	Date (dd/mm/yy)