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		
	Property Owner's Signa	ature		OR	Authorized Agent's Signature	
	Print Name			_	Print Name	
6.	REQUIRED INFORMATION					
	a. Requested Occu	pant Load (ir	ıclude 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 A	APPLICATION	FEE			
F.0.1	D OFFICE LIGE ONLY ()					
FU	R OFFICE USE ONLY (ci	rculate for <i>F</i>	cceptance and	return to i	Plan Checker)	
Dla	n Checker			-	Date	
rian oncoro				_	Date	
Development Planner					Date	
Ар	proved Occupant Load	(not exceeding	the maximum per	mitted by the	e BC Building Code):	
					OL#:	