

File No.: 04-1000-20-2022-248

June 20, 2022

s.22(1)

Dear s.22(1)

Re: **Request for Access to Records under the Freedom of Information and Protection of Privacy Act (the "Act")**

I am responding to your request of May 7, 2022 under the ***Freedom of Information and Protection of Privacy Act, (the Act)***, for:

All records regarding 869 Hamilton Street including permit applications and notes on renovations. Date range: January 1, 1990 to May 6, 2022.

All responsive records are attached. Some information in the records has been severed (blacked out) under s.22(1) of the Act. You can read or download this section here:

http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/96165_00

Please note: Issued permits are routinely available on a fee for service basis from the Property Research section of the By-law and Compliance Administration branch, Development, Building & Licensing Department. To access these records please contact Property Research at property.research@vancouver.ca

Permits can also be searched online at the following link: www.vancouver.ca/permit-search

Please see the following link which also provides more information on obtaining property records:

<https://vancouver.ca/home-property-development/request-property-research-and-copies-of-permits.aspx>

Under section 52 of the Act, and within 30 business days of receipt of this letter, you may ask the Information & Privacy Commissioner to review any matter related to the City's response to your FOI request by writing to: Office of the Information & Privacy Commissioner, info@oipc.bc.ca or by phoning 250-387-5629.

If you request a review, please provide the Commissioner's office with: 1) the request number (#04-1000-20-2022-248); 2) a copy of this letter; 3) a copy of your original request; and 4) detailed reasons why you are seeking the review.

Yours truly,

[Signed by Cobi Falconer]

Cobi Falconer, MAS, MLIS, CIPP/C
Director, Access to Information & Privacy
cobi.falconer@vancouver.ca
453 W. 12th Avenue Vancouver BC V5Y 1V4

If you have any questions, please email us at foi@vancouver.ca and we will respond to you as soon as possible. Or you can call the FOI Case Manager at 604-871-6584.

Encl. (Response Package)

:pm



CITY OF VANCOUVER
PLANNING DEPARTMENT
DEVELOPMENT PERMIT APPLICATION

(THIS IS NOT A PERMIT)
NUMBER **DA213018**

R12 - 01, PA 1002

CO-ORDINATE 026156602730000		PROPERTY ADDRESS 869 HAMILTON		SPECIFICS OF PROPERTY ADDRESS	
APPLICANT IS OWNER NAME LE NAPOLEON RESTA CODE 11 CP s.22(1)	ADDRESS s.22(1)	CITY VAN	POSTAL CODE s.22(1)	PHONE s.22(1)	OPTIONAL RELATED BUS LIC. ACC. NO. 88 BL
PROPERTY OWNER NAME s.22(1)	ADDRESS s.22(1)	CITY VAN	POSTAL CODE s.22(1)	PHONE s.22(1)	OPTIONAL RELATED BUS LIC. ACC. NO. BL
ADDITIONAL CONTACT IS TENANT NAME VILLA DEL LU PO		ADDRESS 869 HAMILTON	CITY VAN	POSTAL CODE V6B 2R7	OPTIONAL RELATED BUS LIC. ACC. NO. BL
LEGAL DESCRIPTION 24	LOT 24	SUB 66	BLOCK 210	PLAN 541	D/L
LOT SIZE WIDTH 25.00FT	CODE 000025000012000	DEPTH 120.00FT	TYPE OF LOT INS LANE	ZONE DD	F.U. DISTRICT 04
BUILDING SIZE HEIGHT 2	STOREYS 2	FRONTAGE 62	DEPTH 04	MEASUREMENTS IN METRIC OR IMPERIAL I	
RELATED DEVELOPMENT APP/PERMIT/REFUSAL	RELATED ZONING BOARD OF VARIANCE 2	BY-LAW REQUIRED EXISTING YARDS PROPOSED YARDS	FRONT 2	REAR 62	SIDE 04
BUILDING CODE CLASSIFICATION A2	OWNER/AGENCY OF APPLICATION (YES OR NO) Y				
LIVING ACCOMMODATION	EXISTING PROPOSED	DWELLING UNITS HOUSEKEEPING UNITS	HOUSEKEEPING UNITS SLEEPING UNITS	SLEEPING UNITS MECHANICAL UNITS	NO. OF ROOF TOP
FLOOR SPACE RATIO BY-LAW PERMITTED EXISTING PROPOSED	FLOOR AREA BY-LAW REQUIRED EXISTING PROPOSED	OFF-STREET PARKING LOADING FACILITIES			
FOR OFFICIAL USE ONLY					
PURPOSE TO CODE 11 17 10	PROPOSED DEVELOPMENT USE CODE TSITS70	FLOOR IDENTIFICATION CELLAR STAIRS	PROPOSED AREA SQ. FT. METRES 270 140	RELAXATION FROM (REVELLMENT) USE CODE 270	FROM AREA SQ. FT. METRES
THIS APPLICATION IS SUBMITTED WITH PLANS TO: (DESCRIPTION OF PROPOSED DEVELOPMENT) ADDITION AND ALTERATIONS TO THE REAR CELLAR/BASEMENT STOREY OF AN EXISTING RESTAURANT BUILDING TO PROVIDE AN ADDITIONAL 270 SQFT OF STORAGE SPACE BY EXCAVATING THE CELLAR. EXTERIOR STAIRS IS ALSO TO BE ENCLOSED APPROXIMATELY 140 SQFT.					
TENANT: VILLA DEL LU PO (LE NAPOLEON RESTA)					
PLANS SUBMITTED (YES OR NO) Y					
TWO SETS AFFICED BY A BUILDING PLAN (YES OR NO) N	LANDSCAPE REQUIREMENT (YES OR NO) N	OWNER'S INTERESTING REQUIRED (YES OR NO) R	HERITAGE STATUS (YES REVEAL FOR CON. MEASUREMENT) C	ENG. CLEARANCE IND. R	STUDY AREAS 2
STEPS WILL BE TAKEN TO ENSURE THE FOLLOWING PERMITS / LICENSES INDICATED WITH AN "R" ARE OBTAINED IF THIS APPLICATION IS APPROVED:					
BUILDING PERMIT R	ELECTRICAL PERMIT R	GAS PERMIT	PLUMBING PERMIT R	OCCUPANCY PERMIT	BUS LICENSE
PROCESSED THROUGH CODE 01	BY-LAW PROVISION CODE (CONDITIONAL OR OUTRIGHT) C	DEVELOPMENT PLANNER	SETS OF PLANS RECEIVED FIVE	SERVICE MAIL TYPE	DROP OFF YES NO
APPLICATION TAKEN BY 10433 D. LEE	FEE SCHEDULE 1 SECTION 3(B) FEE SCHEDULE 1 SECTION DEVELOPMENT PERMIT APPLICATION TOTAL AREA 410				
APPLICATION CHECKED BY	A DEVELOPMENT PERMIT APPLICATION FEE 134.00 B LESS PRELIMINARY FEE PAID C DEVELOPMENT PERMIT APPLICATION BUILDING GRADES MEASUREMENT D DEVELOPMENT PERMIT APPLICATION BUILDING GRADES FEE 134.00				
DATE OF APPLICATION 910704	DEVELOPMENT PERMIT APPLICATION RECEIPT NUMBER 148136 GST REGISTRATION # R121381042 GST EXEMPT				

TYPED 910708

(THIS IS NOT A PERMIT)

NOTE: IF BUILDING PERMIT MUST BE OBTAINED THE BUILDING PERMIT APPLICATION MAY BE MADE AT THE SAME TIME AS THE DEVELOPMENT PERMIT APPLICATION

I AM THE OWNER OF THE PROPERTY DESCRIBED ABOVE, OR AM AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION. I HEREBY VERIFY THAT THE INFORMATION CONTAINED WITHIN THE SHADED AREA ON THIS DOCUMENT IS CORRECT. I VERIFY FURTHER THAT TO THE BEST OF MY KNOWLEDGE, THE INFORMATION CONTAINED IN THE APPLICATION INCLUDING THAT APPEARING ON THE PLANS FILED THEREWITH IS ACCURATE AND THAT SUCH INFORMATION DESCRIBES A USE, A BUILDING OR PORTION THEREOF OF CONSTRUCTION WORK WHICH COMPLIES WITH ALL RELEVANT BY-LAWS. THE ISSUANCE OF THIS PERMIT IS NOT A REPRESENTATION THAT THE USE OR WORK TO BE DONE COMPLIES WITH RELEVANT BY-LAWS. RESPONSIBILITY FOR COMPLIANCE REMAINS WITH THE OWNER, AND THOSE EMPLOYED BY THE OWNER.

SIGNED AT VANCOUVER, B.C.

THIS _____ DAY OF _____ 199 _____

SIGNATURE OF APPLICANT

PRINT NAME OF WITNESS

PERMITS & LICENSES DEPARTMENT INSPECTION REPORT

IR No 221944

Property Address <i>869 Hamilton</i>		Date of Inspection <i>June 04/92</i>
Name and Address of Property Owner/Agent		Specifics of Property Address
Contractor		Number of Storeys <i>DP 213018</i>
Contractors Business Address		Approved Use of Building <input type="checkbox"/> Land <input type="checkbox"/> <i>Restaurant</i>
Contractors Business License Account No.		Present Use of Building <input type="checkbox"/> Land <input type="checkbox"/> <i>—</i>
Reason for Inspection <i>Request for information</i>		

File indicates No Building Permits issued as of this date for the above proposed alterations

On site inspection indicates no progress has been made as per the above D.P. issued.

Recommendation: Refer to Rose in File Room

Date Report Made <i>June 18/92</i>	<input type="checkbox"/> BLDG <input type="checkbox"/> P/Gas <input type="checkbox"/> Elect	<input type="checkbox"/> Ind. Waste <input type="checkbox"/> PUI <input type="checkbox"/> OTHER	Inspector's Name <i>J. Albristo</i>	Signature
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☒ File *DA*
☐ Carbon Copy to
☒ Refer to *Rose*
☐
☐
☐

OFFICE USE

☐ Recheck by Inspector in _____ days
☐ _____ attention in _____ days
 if no _____

PAF

CITY OF VANCOUVER
PERMITS & LICENSING DEPARTMENT
BUILDING PERMIT APPLICATIONNUMBER **BA 219264**

R 0103 P & L 900

NO. ORIGINATE

PROPERTY ADDRESS

SPECIFIC OF PROPERTY ADDRESS

01-156602730000		569 HAMILTON			
APPLICANT INFORMATION		ADDRESS		CITY	POSTAL CODE
NAME JUAN LO GONZALEZ		569 HAMILTON		VAN	V6B 2A7
OR VILLA DEL LIRIO					
PROPERTY OWNER		ADDRESS		CITY	POSTAL CODE
s.22(1)		s.22(1)		VAN	s.22(1)
CONSTRUCTOR		ADDRESS		CITY	POSTAL CODE
NAME C/O TENANT		569 HAMILTON		VAN	V6B 2A7
ADDITIONAL CONTACT IS		ADDRESS		CITY	POSTAL CODE
NAME VILLA DEL LIRIO		569 HAMILTON		VAN	V6B 2A7
LEGAL DESCRIPTION		LOT		SUB	BLOCK
24					210
LOT SIZE		CODE		TYPE OF LOT	ZONE
WIDTH 25.00ft		000025000012000		155/LN	00
DEPTH 120.00ft		CODE 1		CODE 62	62
BUILDING SIZE		HEIGHT		STOREYS	FRONTAGE
					DEPTH
RELATED DEVELOPMENT APPLICATION / PERMIT		RELATED BUILDING BOARD OF APPEAL		DEVELOPMENT PERMIT REQUIRED YARDS	
D		B		REAR SIDE SIDE	
BUILDING CODE CLASSIFICATION		REAR SIDE		SIDE SIDE	
A7		H		YES OR NO	
LIVING ACCOMMODATION		EXISTING PROPOSED		DWELLING UNITS	
				HOUSEKEEPING UNITS	
DEVELOPMENT PERMIT APPROVED FLOOR SPACE RATIO		DEVELOPMENT PERMIT APPROVED FLOOR AREA		PURPOSE TO CODES	
				10	
PROPOSED GENERAL USE CODES				370	

THIS APPLICATION IS SUBMITTED TO:
 INTERIOR/EXTERIOR ALTERATIONS TO RELOCATE COOKING EQUIPMENT AND TO PROVIDE A
 NEW ROOF-TOP EXHAUST FAN IN THIS EXISTING RESTAURANT BUILDING ON THIS SITE.
 NOTE: NO DP OR M/A REQ'D FOR NEW ROOF EXHAUST PER H.HUNKS 931221.

SEE REVERSE FOR INFORMATION REGARDING THE FOLLOWING NOTIFICATION: ☒ INDICATES REQUIREMENTS ☒ INDICATES SUBMITTED ☒ INDICATES TO BE DETERMINED ☒ INDICATES NOT REQUIRED

BUILDING LINE	<input checked="" type="checkbox"/>	LANDSCAPE SETBACK	<input checked="" type="checkbox"/>	HOUSE PLAN	<input checked="" type="checkbox"/>	LIST OF APPLICANCES	<input checked="" type="checkbox"/>
OWNER'S UNDERTAKING	<input checked="" type="checkbox"/>	TRUSS DRAWINGS	<input checked="" type="checkbox"/>	POWER LINE STATE	<input checked="" type="checkbox"/>	SPRINKLER SYSTEM	<input checked="" type="checkbox"/>
HEALTH APPROVAL	<input checked="" type="checkbox"/>	TRIP WARDEN	<input checked="" type="checkbox"/>	FIRE COMMISSIONER	<input checked="" type="checkbox"/>	INDUSTRIAL WASTE	<input checked="" type="checkbox"/>
DEMOLITION PERMIT	<input checked="" type="checkbox"/>	ENGINEERING CLEARANCE	<input checked="" type="checkbox"/>				

OTHER SPECIFIC INFORMATION OR PLANS MAY BE REQUIRED DURING PLAN REVIEW

STUDY AREAS 71

ADDITIONAL INFORMATION

TO COMMERCIAL PLAN CHECKER
 ATTENTION: PETER HONKE

STEPS WILL BE TAKEN TO ENSURE THE FOLLOWING PERMITS (LICENSES INDICATED WITH AN "R") ARE OBTAINED IF THIS APPLICATION IS APPROVED

DEVELOPMENT PERMIT		ELECTRICAL PERMIT		GAS PERMIT		PLUMBING PERMIT		OCCUPANCY PERMIT		BUSINESS LICENSE	
SETS OF PLANS RECEIVED		PROCESS THROUGH CODE		SERVICE TYPE		MAIL		DROP OFF		DO NOT PURGE	
APPLICATION TAKEN BY		BUILDING APPLICATION ESTIMATED VALUATION (COST OF WORK)		A		B		C		D	
M.LAM		20,000		158.75		158.75		158.75		158.75	
APPLICATION CHECKED BY		BUILDING PERMIT APPLICATION WORK WITHOUT PERMIT FEE		B		C		D		E	
— SEE REVERSE FOR NOTICE —		BUILDING PERMIT APPLICATION BUILDING GRADES MEASUREMENT		B		C		D		E	
DATE OF APPLICATION		BUILDING PERMIT APPLICATION BUILDING GRADES FEE		B		C		D		E	
931221		BUILDING PERMIT APPLICATION DRAIN TILE FEE		B		C		D		E	
F		BUILDING PERMIT APPLICATION TOTAL FEE		F		G		H		I	
002393		BUILDING PERMIT APPLICATION RECEIPT NUMBER		002393		002393		002393		002393	

(THIS IS NOT A PERMIT)

I AM THE OWNER OF THE PROPERTY DESCRIBED ABOVE, OR AM AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION. I HEREBY VERIFY THAT THE INFORMATION CONTAINED WITHIN THE SHADED AREA ON THIS DOCUMENT IS CORRECT. I VERIFY FURTHER THAT TO THE BEST OF MY KNOWLEDGE, THE INFORMATION CONTAINED IN THE APPLICATION INCLUDING THAT APPEARING ON THE PLANS FILED THEREWITH IS ACCURATE AND THAT SUCH INFORMATION DESCRIBES A USE: A. BUILDING OR PORTION THEREOF OF CONSTRUCTION WORK WHICH COMPLIES WITH ALL RELEVANT BYLAWS WITH RELEVANT BYLAWS. RESPONSIBILITY FOR COMPLIANCE WITH THE ISSUANCE OF THIS PERMIT IS NOT A REPRESENTATION THAT THE WORK TO BE DONE COMPLIES WITH THE OWNER, AND THOSE EMPLOYED BY THE OWNER.

SIGNATURE OF APPLICANT

THIS _____ DAY OF _____ 199 _____

PRINT NAME OF WITNESS

SIGNATURE OF WITNESS

PART 2

CENTRAL PROPERTY FILE COPY

BA 219264
com PC.
+ PETER MONKE

CITY OF VANCOUVER
DEVELOPMENT AND BUILDING

Application Information Sheet

WES. DEC. 21
@ 11:15

To help expedite submission of your application, please fill out both sides of this information sheet prior to attending the Application Preview counter.

JOB LOCATION

* Correct and complete addressing is important. Complete this section carefully. *

Address: 869 Hamilton Floor Level: _____ Suite No: _____

Legal Description: _____

Lot(s) 24 Block(s) 66 District Lot(s) 591 Plan Number(s) 210

(LIST ALL AFFECTED ADDRESSES FOR THIS PROJECT -- IF MORE THAN ONE SITE OR ADDRESS IS INVOLVED, SEE THE RECEPTIONIST FOR ADDITIONAL SITE IDENTIFICATION FORMS)

Are you aware of the presence of any contaminated soils on the subject property?

Yes ☐ No ☒

Are you aware of the existence of any contaminated soils studies, reports, soils agreements, or Ministry of Environment orders or letters with respect to the subject property?

Yes ☐ No ☒

This area must be completed by the person signing the application form.

Your Name: Julio Gonzalez

You are the:

11 ☒ Owner (of the site)

13 ☐ Contractor

14 ☐ Design Professional

15 ☐ Tenant

16 ☐ Agent for Owner

17 ☐ Consultant

18 ☐ Non-Profit Association

Association No: _____

19 ☐ Other _____

Mailing Address: 869 Hamilton St

City: Vancouver

Postal Code: V6B 2Z7

Phone Number: 688 7436

Company Name: Villa del Lupo

20 ☐ Agent for Tenant

☐ Agent or Employee for _____

Business License Account Number: _____

NOTE: CONTRACTORS/DESIGN PROFESSIONALS/CONSULTANTS MUST HAVE A VALID BUSINESS LICENSE TO DO WORK IN THE CITY OF VANCOUVER. YOU MAY OBTAIN CURRENT BUSINESS LICENSE ACCOUNT NUMBERS FROM THE BUSINESS LICENSE COUNTER.

Complete the following for all applications

Property Owner's Name: s.22(1)

Address: s.22(1)

City: Vancouver BC

Postal Code: s.22(1)

Phone Number: s.22(1)

Is the owner aware of this application? Yes ☒ or No ☐

Contractor's Name: Tenant

Address: _____ City: _____

Postal Code: _____ Phone Number: _____

Business License Account Number: _____

Tenant's Name: Villa del Lupo

Address: 869 Hamilton

City: Vancouver BC

Postal Code: V6B 2Z7

Phone Number: 688 7436

Designer or Other Contact: _____

Address: _____ City: _____

Postal Code: _____ Phone Number: _____

DESCRIPTION OF WORK TO BE DONE:

This application is to:

(Check all that are applicable)

- 01 ☐ Construct a new building(s)
- 10 ☒ Alter the exterior or interior
- 11 ☐ Add to the building(s)
- 13 ☐ Relocate building(s) on the site
- 14 ☐ Raise building(s)
- 15 ☐ Move & place building on new site
- 16 ☐ Install roof top units/satellite dish/fence/swimming pool/tennis court
- 17 ☐ Enclose an existing structure
- 20 ☐ Alter grades
- 30 ☐ Change of use
- 31 ☐ Retain use (such as dwelling units approved for limited periods of time)
- 32 ☐ Convert a building to contain more or less residential units
- 40 ☐ Revise building permit drawing(s)
- 42 ☐ Tenant improvements under the TIPS program
- 10 ☐ Fire repairs
- 90 ☐ Demolish commercial or non-rental one family dwellings
- 91 ☐ Demolish fire damaged building
- 92 ☐ Demolish residential rental building

Is this a new tenant? NO

EXISTING RESTAURANT
Proposed use?

How many storeys? SPLIT

How many levels of underground parking? NONE

How many rooftop units? 3

Describe work to be done:

(Complete carefully - your application will be based on your written description)

RELOCATE COOKING EQUIPMENT, CUT
TALE IN ROOF TO ACCOMMODATE NEW EXHAUST
DUCT, RELOCATE ELECTRICAL, PLUMBING, GAS
TO NEW EQUIP. LOCATIONS, TILE FLOOR,
& PAINT.

What is the value of the work proposed? \$ 20,000⁰⁰
(INCLUDE COST OF PLANS, MATERIAL AND LABOUR)

Will any of the following be altered/repared/installed?

- ☒ Electrical
- ☒ Gas
- ☐ Drain Tile
- ☒ Plumbing
- ☐ Sprinklers
- ☐ Fire Alarm

Sprinkler Contractor's Name: _____

Special Sprinkler Inspection Number PP _____

RECEIPT #	<u>002393</u>
OFFICE USE ONLY	
BA	<u>158.75</u>
DA	
DT	
BG	
ELIF	
SUB TOTAL	
PP	
TOTAL	<u>158.75</u>

Complete the following for all Residential Buildings:

	TOTAL EXISTING UNIT(S)	TOTAL PROPOSED UNIT(S)
Total number of dwelling units:	_____	_____
Total number of housekeeping units:	_____	_____
Total number of sleeping units:	_____	_____
Will you be Strata Titling? Yes <input type="checkbox"/> No <input type="checkbox"/>		

Complete the following related Permit Information

Development Permit/Application Number DA _____ DP _____

Minor Amendment Number M/A _____ to DP _____

Building Permit/Application Number BA _____ BP _____

Board of Variance Appeal Number Z _____

SIGNED AT VANCOUVER, B.C.

21ST

DAY OF

DECEMBER

2003

DATE ISSUED AT COUNTER _____ 19__

DATE MAILED TO APPLICANT _____ 19__

PERMIT NUMBER BP _____ 1__

NOTE: if i.e. BP is first partial permit, code BP number suffix as "01".

SUMMARY OF PLAN CHECKING

PROPERTY ADDRESS: _____ 8691 _____ Hamilton _____

SPECIFICS OF PROPERTY ADDRESS: _____

PROPOSED WORK: _____ PER ADDITION APPLICATION _____

APPLICATION NO. BA 212864 CHECKED BY H.W. DATE 93 12 29

APPLICANT Mr./Ms./Mx. Mrs. JUNE GONZALEZ Architect/Engineer/Constructor/Owner

of _____ was notified

by telephone/ in this office/ by mail/ of the following requirements
necessary to obtain a Building Permit:-

ITEM NO.	BRIEF DESCRIPTION OF ITEMS (See Attached Check Sheets)	DATE NOTIFIED	DATE CLEARED
	Permit Stamp <input type="checkbox"/> Permit Stamp Filled <input checked="" type="checkbox"/> All Codes Filled-in <input checked="" type="checkbox"/> Yellow Sheet Co-signed <input checked="" type="checkbox"/> Drawings Numbered and Initialed <input checked="" type="checkbox"/>		
PCA	PLEASE SIGN PER		
1/	Plat & Roof Analysis By Peds		

ISSUE BUILDING PERMIT SUBJECT TO CLEARANCE OF FOLLOWING ITEMS:-

NUMBERS _____

AND TYPE FOLLOWING CONDITIONS ON PERMIT:-

CODES: 82 | | | | | | | | | | | | | | | | | | | | | |

Emergency lighting shall comply with Subsection 3.2.7 of the
VBSL #6134.

Exit signs shall comply with Subsection 3.4.5 of the VBSL #6134.

Checked By: Signature Phil Warden Date 93 12 29Staff Number 10461

PROPERTY
ADDRESS

869

HAMILTON

SPECIFICS OF
PROPERTY ADDRESS

APPLICATION NO. BA 219244

CHECKED BY

H

DATE 9/3/12

ITEM NO.	ITEMS CHECKED	COMMENTS	APP. OR REJ.	ACTION TAKEN	CL'D
5/	Work to comply.				
	Exhaust/vent system		✓	ok'd by P.H.	
	Part of confirmation by		R.	Plan to remove	
	Pool re loading on				
	Roof				
6/	TABLE A.	PER: 12th		SEE ATTACHMENT	Quoted.
	* EM LIGHTS		R	Comments	
	* EXIT SIGNS.			on	
				FIGURE	

PROPERTY
ADDRESSSPECIFICS OF
PROPERTY ADDRESS

APPLICATION NO.

CHECKED BY

DATE

ITEM NO.	ITEMS CHECKED	COMMENTS	APP. OR REJ.	ACTION TAKEN	CL'D
	<u>RENO & ALTERATION WORK / per discussion w/ applicant and attached notes.</u>				
	PLUMB TUB. (28 REQ'D?)		\$2,520. ⁰⁰ x		
	ELECTRICAL		{ 1,500. ⁰⁰ (1,457).		
	PLUMB'S - (GAS FITTING.)	\$4,800	{ 1,800. ⁰⁰		
	VENTIN & STAIR WORK		{ 1,500. ⁰⁰		
	<u>APPLIANCES & MOVING/INSTALLATION OF APPLIANCE</u>				
	2 OVENS, REFRIGERATOR.		5200. ⁰⁰		
	CONVECTION OVEN				
	LABOUR TO MOVE & INSTALL.		7500. ⁰⁰		
			<u>TOTAL. \$20,000</u>		
	 % of 4800 / 40,000 = 12% 2x Assessment				

Building Alteration

Page 1

Property
Address

809. HAMILTON.

Checked by Hilton Watkins

Application No. BA 219264

Staff No. 10461

Date 931228

ITEM NO.	ITEMS CHECKED	COMMENTS	APP. OR REJECT	ACTION TAKEN	CL'D
1.	PROPOSED WORK:	PER APPLICATION			
2.	DP(M.A.): REQD/NOT REQD	DWG/CHECKLIST			
3.	BLDG HISTORY: DATE/USE/PARTICULAR:				
4.	CONSTRUCTION: USE A-2	B.A. 1650 sq / 153m ²			
	# OF STOREY: 2, # OF STREET: 1				
	PART 3 (3.2.2. 1141); PART 9				
	NONCOMB: REQD/NOT REQD				
	SPRINKLER: REQD/NOT REQD				
	FIRE RESISTANCE RATINGS:				
	STOREY BELOW GROUND (2HR/3HR)				
	FLOOR: 3/4, MEZZ: , ROOF: 3/4				
5.	PROJECT AREA TO CONFORM	KN ERM.	✓	PER P. HANKE	
	(3.8 NOT PERMITTED IN NEW CONST)				
6.	TABLE A	CONST/ACT VALUE= $\frac{4800}{2 \times 20,000} = 12\%$			
	COMMENTS ON BACK OR ATTACHED SHEETS				
7.	ASSURANCE LETTERS: PA1/ PA2/ PA2a/ PA2b/ PA2c				
	PA2d/ PA2e/ PA2f/PA4				
8.	OWNER UNDERTAKING/ ENG CLEARANCE		✓/NA		
9.	MISCELLAN.	HEALTH DEPT/C.C.F.L./IND. WASTE	✓/NA		
	FIRE WARDEN		R		
	FILE CHECK				
	EQUIVALENCY/ MINOR RELAX.				
	ADDITION ONLY: ENERGY UTIL FEE		NA		

PERMITS & LICENSES DEPARTMENT INSPECTION REPORT 05

IR 318434

Property Address <u>869 Hamilton St.</u>		Date of Inspection <u>Nov 5/96</u>	
Name and Address of Property Owner/Agent		Specifics of Property Address	Permit No.
Contractor		Number of Storeys	Approved Use of Building <input type="checkbox"/> Land <input type="checkbox"/>
Contractors Business Address	Contractors Business License Account No.	Present Use of Building <input type="checkbox"/> Land <input type="checkbox"/>	
Reason for Inspection <u>Fire Survey - Fire damage to 2nd floor rear of bldg. 96/11/07 K.O.</u>			

PERMIT EL-415131 WAS TAKEN OUT
TO CORRECT FIRE DAMAGE.

Date Report Made	<u>Nov 14 / 96</u>
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☐ BLDG ☐ Ind. Waste
☐ P/Gas ☐ PUI
☒ Elect ☐ OTHER

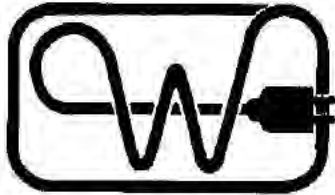
Inspector's Name <u>S. Kovacic</u>	Signature <u>[Signature]</u>
---------------------------------------	---------------------------------

☒ File pls file w/w.
☐ Carbon Copy to _____
☐ Refer to _____
☐ _____
☐ _____
☐ _____

OFFICE USE

S. KOVACIC
Electrical Insp. - Dist. No. 05

☐ Recheck by Inspector in _____ days
☐ _____ attention in _____ days
 if no _____

**WESPAC****ELECTRICAL CONTRACTORS LTD.**108 Blue Mountain Street, Coquitlam, B.C., Canada V3K 4G8
Tel: (604) 522-1322 Fax: (804) 521-4811**F A X****TELEFAX TRANSMISSION**

To: Stan Kovacic
Company: City of Vancouver Electrical Inspections
Fax: 873 7100

From: Jackie Ilott

Date: Dec. 2/ 96

Pages (including this page): 1

Comments:

Project: FIRE DAMAGE REPAIRS - VILLA DEL LUPO RESTAURANT
889 HAMILTON STREET, VANCOUVER

PERMIT #: EL415131

Please be advised that the balance of the electrical repair work (after our rough wire inspection Nov. 5 /96) has been completed by another electrician, apparently hired by the owner.

We wish to finalize our permit for this job.

If you have any questions, or if we can be of further assistance, please do not hesitate to call.

Yours truly,

Jackie

PERMITS & LICENSES DEPARTMENT

Reg. No.

DEC 02 1996

Received by S. Kovacic

COPY TO:

Cranton, Charlene

From: on behalf of Noise Complaints
Subject: FW: On-Line NOISE COMPLAINT FORM

From: mailpost@vancouver.ca [mailto:mailpost@vancouver.ca]
Sent: Friday, December 03, 2010 10:44 AM
To: Noise Complaints
Subject: On-Line NOISE COMPLAINT FORM

CONFIDENTIAL

ADDRESS OF CONCERN: Lupo Restaurant, 869 Hamilton Street, Vancouver, V6B 2R7

Name: s.22(1)
Phone No.: s.22(1)
Address: s.22(1) Vancouver s.22(1)
Email: s.22(1)

What type of noise? Construction, equipment, people, radio, waste hauler trucks, leaf blower, live music in restaurant, lawn mowers, etc.

External 'muzak' speaker outside the front door of the restaurant, just off the sidewalk at the top of stairs (one storey); right across the road from 888 Hamilton, and right next door to another residential building.

When is the noise occurring? (time, dates)

The speaker was installed sometime in the late spring/early summer and used to be audible between about 5pm and 9 or 10pm; in the last 4+ weeks it is audible from noon to 10pm or midnight, depending on the day. Last Friday it was loud till midnight (the 28th of Nov.)

How often is the noise occurring?

Daily.

Have you approached the person(s) or establishment who is causing the concern? What was the outcome?

s.22(1)
s.22(1) My request was ignored. Over the last 4+ weeks it has become louder and goes on for longer periods.

Have you contacted any other department regarding your concern? E.g., Police, Health?

Not yet.

Other known details, e.g., Location of the equipment, company names, waste hauler truck #, container bin #.

Other Lupo contact info:
www.luporestaurant.ca
604.569.2535

EN# 066532 Referred to: J. Araya Route: Y or N



Ministry of Public
Safety
and Solicitor
General

Liquor Control and
Licensing Branch

Mailing address:
PO Box 9292 Stn Prov Govt
Victoria, BC V8W 9J8

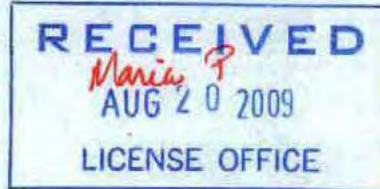
Telephone: 250 387-1254
Facsimile: 250 387-9184

Location:
Second Floor
1019 Wharf Street
Victoria, BC

<http://www.pssg.gov.bc.ca/lclb>

FINAL NOTICE OF EXPIRY - LIQUOR LICENCE

Licensee Name: 0724872 B.C. Ltd.
Mailing Address: 869 Hamilton St
VANCOUVER, BC V6B 2R7



LCLB Inquiries
Call 1-866-209-2111

Job #000733087-020

"CERTIFIED"

Establishment Name: Vai Restaurant
Licence Name: Vai Restaurant
Licence Number: 139553
Licence Class: Food Primary

Licence Expiry Date: June 30, 2009

Notice to Licensee:

Re: Expired Liquor Licence

August 13, 2009

The Liquor Control and Licensing Branch did not receive your renewal application, renewal fee and late renewal penalty within the prescribed time period. Consequently, your expired liquor licence is no longer eligible for renewal and you no longer hold a valid liquor licence. You were advised of this possibility in a late renewal notice dated July 07, 2009.

In accordance with the provisions of the *Liquor Control and Licensing Act* you are prohibited from operating your licensed establishment without a valid liquor licence.

All liquor purchased for sale under your licence, if applicable, must be returned to your assigned liquor store for refund and is subject to the restocking policies of the Liquor Distribution Branch.

Should you wish to obtain a new liquor licence, you must apply as a new applicant to the Liquor Control and Licensing Branch Head Office in Victoria. Please note that all new liquor licence applications are subject to current legislation and Branch policies and that any special rights or privileges associated with your previous licence expired with that licence.

If you have any questions regarding this notice or about applying as a new applicant, please contact the LCLB toll free at 1-866-209-2111 or at 387-1254 in Victoria.

cc: Inspector (Marilyn Lowden)
RCMP (VANCOUVER POLICE DEPT. - #5 (Active))
LG (VANCOUVER (CITY OF))

LDB Store (CENTRAL LICENSEE VANCOUVER,
THURLOW & ALBERNI GLS #129, CAMBIE GLS #160)

OCABC
Consumer Taxation Branch

CO-ORDINATE		PROPERTY ADDRESS <div style="text-align: center; font-weight: bold;">859 HAMILTON</div>		SPS OFFICE OF PROPERTY ADDRESS	
PERMIT ISSUED TO INFORMATION: NAME: BRIDGE ELECTRIC CORP. ADDRESS: 4331 VANGUARD CITY: RICHMOND, B.C... POSTAL CODE: V6X 2P6 PHONE NUMBER: 273-2744 PERMIT ISSUED TO CONTRACTOR (YES OR NO) Y				PROPERTY OWNER INFORMATION: NAME: VILLA DEL LUPO ADDRESS: CITY: POSTAL CODE: PHONE NUMBER:	
RELATED BUSINESS LICENSE NO: B10133		PERMIT NO: 10546			
INSPECTION DISTRICT NO: 12	RELATED DEVELOPMENT PERMIT: DP	RELATED BUILDING APP. PERMIT OR SPECIAL INSPECTION APPLICATION: BP219264	RELATED SIGN PERMIT: NP	RE INSPECTION NOTICE:	PHONED B.C. HYDRO:
USE OF BUILDING: RESTAURANT		GENERAL USE CODE: s70	1 FAMILY DWELLING (YES OR NO):	PLANS SUBMITTED (YES OR NO): N	DO NOT PURGE:
				DECLARATION (IS JUDGMENT OR NOT REQUIRED): N	
PURSUANT TO THE ELECTRICAL BY-LAW, THE FOLLOWING WORK IS HEREBY AUTHORIZED:					
SERVICE (NEW OR EXISTING): E	SIZE OF SERVICE SWITCH (AMPS):	SIZE OF CONDUCTOR:	INDICATED WITH A "Y" IF APPLICABLE ANNUAL PERMIT TEMP. TYPICAL INTERV. TEMP. ONLY		
LOCATION OF SERVICE POINT:					
NUMBER OF OUTLETS INSTALLED:	CONDUIT, METAL (INCLUDING):	FITTINGS OR FITURES:	COMPLETE CONDUIT INSTALLATIONS:	APPLIANCES, MOTORS, SIGNS & MISCELLANEOUS:	
DATE INSPECTION REQUESTED:				RE-ARRANGE KITCHEN EQUIPMENT	
CLASS OF WORK:					
INSPECTION COMPLETION DATE:					
INSPECTION COMPLETION DATE:					
PERMIT ISSUED BY: S. DUGARD 10573					
PERMIT AUTHORIZED (CHECKED BY):					
I, THE OWNER, OF THE PROPERTY DESCRIBED ABOVE, OR AM AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION, HEREBY CERTIFY THAT THE INFORMATION CONTAINED WITHIN THE ABOVE AREA ON THIS DOCUMENT IS CORRECT. I VERIFY FURTHER THAT TO THE BEST OF MY KNOWLEDGE, THE INFORMATION CONTAINED IN THE APPLICATION INCLUDING THAT APPEARING ON THE PLANS FILED THEREWITH IS ACCURATE AND THAT SUCH INFORMATION DESCRIBES A USE, A BUILDING OR PORTION THEREOF OF CONSTRUCTION WORK WHICH COMPLIES WITH ALL RELEVANT BY-LAWS. THE ISSUANCE OF THIS PERMIT IS NOT A REPRESENTATION THAT THE USE OR WORK TO BE DONE COMPLIES WITH THE BY-LAWS. RESPONSIBILITY FOR COMPLIANCE REMAINS WITH THE OWNER AND THOSE EMPLOYED BY THE OWNER.				FINAL APPROVAL: (Stamp) 5/4/3	
MAY THE OWNER, OF THE PROPERTY DESCRIBED ABOVE, OR AM AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION, HEREBY CERTIFY THAT THE INFORMATION CONTAINED WITHIN THE ABOVE AREA ON THIS DOCUMENT IS CORRECT. I VERIFY FURTHER THAT TO THE BEST OF MY KNOWLEDGE, THE INFORMATION CONTAINED IN THE APPLICATION INCLUDING THAT APPEARING ON THE PLANS FILED THEREWITH IS ACCURATE AND THAT SUCH INFORMATION DESCRIBES A USE, A BUILDING OR PORTION THEREOF OF CONSTRUCTION WORK WHICH COMPLIES WITH ALL RELEVANT BY-LAWS. THE ISSUANCE OF THIS PERMIT IS NOT A REPRESENTATION THAT THE USE OR WORK TO BE DONE COMPLIES WITH THE BY-LAWS. RESPONSIBILITY FOR COMPLIANCE REMAINS WITH THE OWNER AND THOSE EMPLOYED BY THE OWNER.				VALUATION (COST OF WORK): 2000	
PERMIT FEE: 124.00				WORK WITHOUT PERMIT FEE:	
BY-LAW COMPLIANCE FEE:				TOTAL FEE: 124.00	
MAIL:				G.S.T. exempt: 0	
DATE OF PERMIT: 931231				Reg. No. R121361042	

CITY OF VANCOUVER CASH REGISTER IMPR-SSION CONSTITUTES
A PAID RECEIPT A RETURNED CHEQUE NULLIFIES THE TRANSACTION

ELECTRICAL PERMIT - REVERSE SIDE

 E P

[illegible][illegible]

FORM 1

APPLICATION FORM FOR
MAXIMUM OCCUPANT LOAD DETERMINATION1 set of drawings
back to applicant
for LCB process

F1407295

Building Address: 869 Hamilton St, Vancouver BC
 Business Name: Lupo Restaurant Business Phone: 604-720 9032
 Previously Known As: Villa del Lupo Restaurant
 Occupancy (restaurant, pub, etc.): Restaurant

Applicant	Premise Owner
Name: <u>Michael Mameli</u>	Name: <u>s.22(1)</u>
Title: <u>Owner</u>	Address: <u>s.22(1)</u>
Address: <u>s.22(1)</u>	City: <u>VAN</u> Postal Code: <u>s.22(1)</u>
City: <u>s.22(1)</u> Postal Code: <u>s.22(1)</u>	Phone: <u>s.22(1)</u>
Phone: (day) <u>s.22(1)</u>	
Fax: <u>s.22(1)</u> Cell: <u>s.22(1)</u>	

Associated Permit: DE _____ BU _____

Previously Approved Occupant Load: Yes ☒ No _____

By: (office) _____ Date: _____

For L.C.B.C. Approval: Yes _____ No _____ Class _____ license



(If you have more than 2 rooms/areas, submit a list in a similar format)

Room/Area #1 (name) <u>Main Floor</u>			
Gross floor area: <u>134.71</u> m ²	Net floor area: <u>77.02</u> m ²	@ 1.2 m ² /person = <u>64.2</u>	
# of exits: <u>2</u>	Total exit width: <u>1778</u> mm	@ 8 mm/person = <u>111</u> *	
Occupant load =		<u>64</u>	
Room/Area #2 (name) <u>Second Floor</u>			
Gross floor area: <u>73</u> m ²	Net floor area: <u>36.85</u> m ²	@ 1.2 m ² /person = <u>30.7</u>	
# of exits: <u>1</u>	Total exit width: <u>901.7</u> mm	@ 8 mm/person = <u>56</u> *	
Occupant load =		<u>30.7</u>	<u>31</u>

* assuming both exits are equal in width

I hereby certify that the figures entered above represent a true and accurate calculation of the premises in question.

Signature: Mameli Date: OCT 28/09

Return completed form with your scale drawings of the specific areas along with a cheque in the amount of \$300 (up to 150) or \$500 (151+) to the Fire Prevention Division Office: 201-456 W. Broadway, Vancouver, B.C. V5Y 1R3

Faxback Document No. 508

MAXIMUM OCCUPANT LOAD

PREMISES LOCATED AT: 869 Hamilton St.
KNOWN AS: Lupo Restaurant

1. LICENSED BEVERAGE
ESTABLISHMENT

PERSONS

4. NON-FIXED SEATS

PERSONS

2. DINING AND
CAFETERIA SPACE

95

PERSONS

5. STANDING ONLY

PERSONS

3. NON-FIXED
SEATS AND TABLES

PERSONS

6. OTHER USES

PERSONS



DATE PLANS APPROVED: November 2, 2009

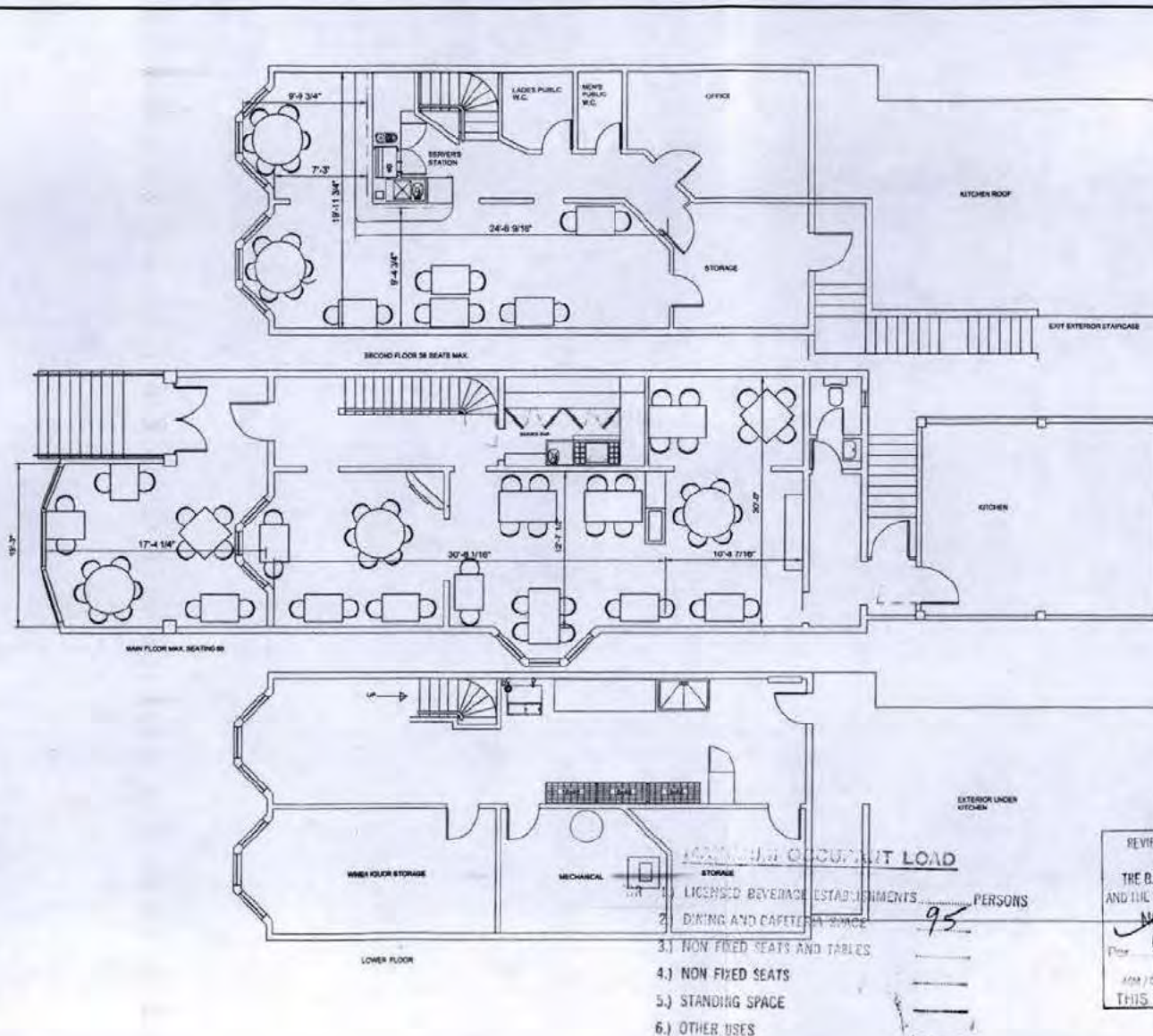
PLANS APPROVED BY: Mike Knapp **PIN #:** 06721

FIRE CHIEF: Les Sziklai

**CITY OF VANCOUVER
OFFICE OF THE FIRE CHIEF**

ISSUED UNDER REGULATIONS MADE PURSUANT TO BY-LAW NO. 8191

F1407295



GENERAL NOTES

- [illegible]

[illegible]

SUPPLIER CODE

M	RUSSELL FOOD EQUIPMENT LTD.
Q	QUEST METAL WORKS LTD.
O	BY OTHERS (INC)
E	EXISTING ITEM
F	FUTURE ITEM
C	CUSTOM

10770 10/22/2015 11:51:45 AM 10/22/2015 11:51:45 AM

Quest

*Craftsmen in Stainless Steel

1230 VENDOR ST., VANCOUVER, BC V6A 3J8 CANADA
PH: (604) 681-7771 FAX: (604) 681-1104

TEL. NO.	804-255-7771	DATE	SEPT 24 2009
----------	--------------	------	--------------

DAVE TOWNSEND	VANCOUVER, B.C.
CHECK	SCALE 1/8" = 1' - 0"

FILE NO. 944-09

20

**LUPO RESTAURANT
AND VINOTECA**

SEATING LAYOUT

869 HAMILTON ST.
VANCOUVER B.C.

REVIEWED AND ACCEPTED
PURSUANT TO
THE B.C. FIRE SERVICES ACT
AND THE VIOLOLVER FIRE BY-LAW
MAY 2 2009
L. SZIKLAI
AFSA / Deputy Chief, Fire Prevention
THIS IS NOT A PERMIT

DATE INSPECTED	INSPECTOR	REGULAR INSPECTION	REMARKS	RECHECK
92/09/27	deleghin	OK		Kukun
Apr 29/93	Nelson	OK		Bell
SEPT 14/93	White		NO ENTRY	Taylor
94-04-19	Gandolfo	OK		Nunes
95-09-15	LOWSTONE	O.K.		Pandora
96-05-28	BRYANT	R10K		NAUGHTY
96-11-03			FIRE IN REAR OF BLD 2 ND FLOOR OFFICE E/F/D TO ROOM + COM'S E/F/D TO BLIND + COM'S MOJOY	
97/03/05	JANSEN	FD 47	NO ENTRY	JENKINSON
97/03/06	FELDER	R10K		JENKINSON
98/03/28	Reming	R10K		Turkington
YEAR OF CONSTRUCTION		CLASS OF BUILDING		NUMBER OF STORIES
1910		3 C 17-171		2 1/2
SPRINKLER SYSTEM		DATE ENG. CERTIFICATE ISSUED FOR FIRE ESCAPE		OWNER'S NAME
Full <input type="checkbox"/> Partial <input type="checkbox"/> Date installed				s.22(1)
DATES OF UPGRADING		Exits		ADDRESS
Fire alarm System		Emergency Lighting		s.22(1)
OCCUPANT		USED AS		TELEPHONE
VILLA DE LUPO		RESTAURANT		s.22(1)
NO	STREET	KNOWN AS	ALSO SEE	
869	HAMILTON		688-7436	
			100	

DATE INSPECTED	INSPECTOR	REGULAR INSPECTION	REMARKS	RECHECK
Feb 22/99	Kitchner		No entry	
July 11/00	Nauratil	RIOK		Kirelia
02/09/26	HUMENNY	O.K.		GILMORE
03/06/12	BUCKINGHAM	RIOK		JENNISON
Sept. 20/04	HEPPNER		VERBAL FOR EXTINGUISHER CHECK IN OCTOBER	
Nov 25/05	Kielan	RIOK		
Apr 3/06	Don Conrad	RIOK		Dennis
Mar 25/07	Kielan	RIOK		Radocker
Jan 05/07	SANDBERG		RIOK - FD47	Morley
Aug 19/2010	methorst	RIOK		

DATE INSPECTED	INSPECTOR	REGULAR INSPECTION	REMARKS	RECHECK
93/04/29	Nelson	OK		BeN
93-07/10	Regalado	OK		Hellish
Sept 14/93	White		No entry	Taylor
94-04-19	GANDOLFO	OK		NUNNS
94-10-20	AUMAN	OK		WOOD
95/05/31	COUPE	OK		
95-09-15	JOHNSON	OK		PARRIN
96-05-28	BRYANT	OK		NALCUT
96-11-03			FIRE IN REAR OF REST 2 nd FLOOR OFFICE E/F/D TO ROOM & EXITS. E/F/D TO RD & COURTS. MECHLY	
97-03/06	JANSEN		NO ENTRY FD 47	SEMINSON
YEAR OF CONSTRUCTION		CLASS OF BUILDING 3C 17-171		NUMBER OF STORIES 2 1/2
SPRINKLER SYSTEM: Full <input type="checkbox"/> Partial <input type="checkbox"/> Date Installed		DATE ENG. CERTIFICATE ISSUED FOR FIRE ESCAPE		OWNER'S NAME s.22(1)
DATES OF UPGRADING: Fire alarm System 7 yrs Fire Separations		Exits Emergency Lighting		ADDRESS s.22(1)
OCCUPANT VILLA DE LUPO		USED AS RESTAURANT		TELEPHONE s.22(1)
NO. 869 HAMILTON STREET		KNOWN AS		ALSO SEE s.22(1)
				100

DATE INSPECTED	INSPECTOR	REGULAR INSPECTION	REMARKS	RECHECK
MAR 6/98	FELDER		RIOK	JENKINSON
MAR 28/98	Renning		RIOK	Turkington
MAR 24/99	No entry	KITCHEN		
July 1/00	ANZUO		RIOK	KURELICH
AUG 16/01	HUTCHINSON	OK		KURELICH
JUN 12/03	BUCKWILLHAM		RIOK	JENKINSON
Sept 20/04	HEPPER		VERBAL FOR EXTINGUISHER CHECK IN OCTOBER.	THIBERT
Nov 25/05	KELAN	RIOK		
Apr 3/06	Cochrane	RIOK		Parrin
Mar 07	KELAN	RIOK		Radcocker
Jan 06/08	Sandberg		RIOK - FD 47	Morley
Aug 19/08	Methorst	RIOK		

VANCOUVER FIRE DEPARTMENT
BUSINESS INFORMATION FORM



DH

BUILDING ADDRESS: 869 HAMILTON
[if building has multiple addresses use the lowest]
PROPERTY COMPLEX: _____ BUSINESS NAME: VILLA DE LUPO Restaurant.
BUSINESS ADDRESS: SAME
BUSINESS PHONE: 688-7436 PROPERTY CLASSIFICATION: 17-171
ROUTE SEQUENCE #: _____ FIREHALL / WARDENS DISTRICT #: _____
Halls 1 - 22 - FWs 60 - 69
BUSINESS OWNER: Julio Gonzalez / Mike Mamelli PHONE - WORK: 688-7436
BUSINESS CONTACT: 778 389 4128 PHONE - WORK: _____
- Home: _____
- Home: _____

s.22(1)

CITY OF VANCOUVER

PERMITS & LICENSES DEPARTMENT

City Hall, East Wing
453 West 12th Avenue
Vancouver, British Columbia
Canada V6Y 1V4
Phone (604) 873-7611
FAX (604) 873-7100



DIRECTOR:
J.A. Perri

DEPUTY DIRECTOR:
R.L. Maki, PEng
Permits & Inspection Division

PLEASE REFER TO:
Mr. M. Twynstra
Manager,
Property Use Branch
at 873-7563
I.R. No. 320118

1996 June 24

pu-04

Le Napoleon Restaurant (1979) Ltd.
869 Hamilton Street
Vancouver, BC
V6B 2R7

Dear Sirs:

Re: 869 Hamilton Street

On June 11, 1996, the District Property Use Inspector reported that the address 869 Hamilton Street is not posted on the building, in contravention of the Vancouver Building By-law.

In accordance with the By-law and to avoid further action, you are required to post the address in a conspicuous place on the building within 30 days of the date of this letter.

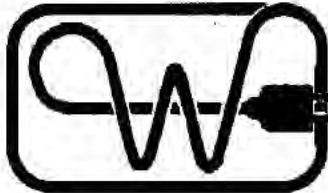
Yours truly,

M. Twynstra, for
R.L. Maki, PEng
CITY BUILDING INSPECTOR

GG/JM/jsl

cc: Villa del Lupo } tenant
869 Hamilton Street } on BL10
Vancouver, BC
V6B 2R7

JUL 24/96

**WESPAC****ELECTRICAL CONTRACTORS LTD.**108 Blue Mountain Street, Coquitlam, B.C., Canada V3K 4G8
Tel: (604) 522-1322 Fax: (604) 521-4811**FAXED**
12250**TELEFAX TRANSMISSION**

To: Stan Kovacic (or Angelo Viani)
Company: City of Vancouver Electrical Inspections
Fax: 873 7100

From: Jackie Ilott

Date: Dec. 2/ 96

Pages (including this page): 1

Comments:

Project: FIRE DAMAGE REPAIRS - VILLA DEL LUPO RESTAURANT
889 HAMILTON STREET, VANCOUVER

PERMIT #: EL418131

Please be advised that the balance of the electrical repair work (after our rough wire inspection Nov. 5 /96) has been completed by another electrician, apparently hired by the owner.

We wish to finalize our permit for this job.

If you have any questions, or if we can be of further assistance, please do not hesitate to call.

Yours truly,

Jackie

PERMITS & LICENSES DEPARTMENT

Reg. No.:

MAR 25 1997ORIGINAL TO: *S. Kovacic*

COPY TO:

**PERMITS & LICENSES DEPARTMENT
INSPECTION REPORT**

IR 322058

Property Address 869 Hamilton		Date of Inspection July 25/96	
Name and Address of Property Owner/Agent Le Napoleon		Specifics of Property Address N/A	Permit No. N/A
Contractor Villa Del Lupo		Number of Storeys N/A	Approved Use of Building <input checked="" type="checkbox"/> Land <input type="checkbox"/> Restaurant
Contractors Business Address N/A	Contractors Business License Account No. 93212	Present Use of Building <input checked="" type="checkbox"/> Land <input type="checkbox"/>	"
Reason for Inspection Recheck Civic Address.			

Obs: Address posted

Req: Information clear

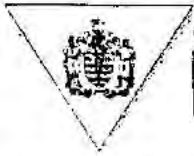
Rec: File

Date Report Made July 25/96	<input type="checkbox"/> BLDG <input type="checkbox"/> P/Gas <input type="checkbox"/> Elect	<input type="checkbox"/> Ind. Waste <input checked="" type="checkbox"/> PUI <input type="checkbox"/> OTHER	E. CHAPELLE Inspector's Name Property Use Insp. — Dist. No: 18	Signature
---------------------------------------	---	--	--	-----------

☒ File **sh**
☐ Carbon Copy to _____
☐ Refer to _____
☐ _____
☐ _____

OFFICE USE

☐ Recheck by Inspector in _____ days
☐ _____ attention in _____ days
 if no _____



CITY OF VANCOUVER

Planning

To Carlene Robbins
Permits & Licences**DEVELOPMENT COST LEVY APPLICATION**

To be completed for all D.P.'s in Development Cost Levy Areas.

ADDRESS: 869 Hamilton St. Reg. No. _____ DATE: 96.11.21DEVELOPMENT PERMIT #: 401793 DEC 27 1996

BUILDING #	USE	ORIGINAL COPY TO:	GROSS FLOOR AREA (FOR D.C.L. PURPOSES)
	<u>Restaurant</u>	<u>CR</u> <u>File</u>	<u>395 ft²</u>

PCT SIGNATUREPRINT NAME: Steve Hearn

To be completed for all minor amendments in Development Cost Levy Areas.

ADDRESS: _____ DATE: _____

DEVELOPMENT PERMIT #: _____

M.A. #: _____

BUILDING #	USE	GROSS FLOOR AREA (FOR D.C.L. PURPOSES)

[These calculations supercede any previous calculations regarding this D.P.]

PCT SIGNATUREPRINT NAME:

D.P. FILE COPY

PERMITS & LICENSES DEPARTMENT INSPECTION REPORT


IR 320118

Property Address 869 HAMILTON		Date of Inspection 96/06/11	
Name and Address of Property Owner/Agent LE NAPOLEON RESTAURANT (1979) LTD		Number of Storeys	Permit No.
Contractor 869 HAMILTON ST. VAN V6B 2R7		Approved Use of Building <input checked="" type="checkbox"/> Land <input type="checkbox"/> Restaurant Class 1	
Contractors Business Address	Contractors Business License 93212 Account No. 93213	Present Use of Building <input checked="" type="checkbox"/> Land <input type="checkbox"/> Restaurant Class 1	
Reason for Inspection ROUTINE			

General: Inspection revealed the civic address is not posted on this building.

Requirement: Impaction of Bldg By-law.

REC: Refer to BONNIE LEE for letter.

Date Report Made 96/06/12	<input type="checkbox"/> BLDG <input type="checkbox"/> P/Gas <input type="checkbox"/> Elect	<input type="checkbox"/> Ind Waste <input checked="" type="checkbox"/> SUI <input type="checkbox"/> OTHER	G. GUSDAL Property Use Insp: -- Dist: No: Inspector's Name 04  Signature
----------------------------------	---	---	---

☐ File
☒ Carbon Copy to
☒ Refer to **B. Lee**
☐ **address letter**

OFFICE USE

☐ Recheck by Inspector in _____ days
☐ _____ attention in _____ days
 If no _____

COPY SENT

CITY OF VANCOUVER

(THIS IS NOT A PERMIT)

PERMIT TYPE		DEVELOPMENT PERMIT APPLICATION				APPLICATION NUMBER	
		A				DE 401994	
LEGAL DESCRIPTION Lot 24 Blk 66 Plan 210 DL 541					ADDRESS 869 HAMILTON ST		
ADDITIONAL ADDRESS INFORMATION					SPECIFICS		
APPLICATION DATE DEC 20, 1996	PURPOSE INSTALL	PROJECT VALUE	ASSESSED VALUE \$14,700	PLANS 5	METRIC NO	PLACE NAME	
HERITAGE DESIGNATION	HERITAGE STATUS C: CONTEXTUAL	TEMPORARY USE DATES				SUBTYPE	
APPLICANT PROPERTY OWNER s.22(1) I.E. NAPOLEON RESTAURANT s.22(1) VANCOUVER BC s.22(1)					CONTACT 2		
CONTACT 1					CONTACT 3		
TEL s.22(1)	BUS. LICENSE CERTIFICATE	TEL FAX	BUS. LICENSE CERTIFICATE	TEL FAX	BUS. LICENSE CERTIFICATE		
THIS APPLICATION IS SUBMITTED WITH PLANS TO: Exterior alterations to this existing heritage class "C" restaurant class 1 building on this site to install an overheight fence.							
PROPOSED USE 870 RESTAURANT (1)		SPECIFICS/LOCATION AREA (SF) OCC A2		PROPOSED USE		SPECIFICS/LOCATION AREA (SF) OCC	
ITEM 0040 PROCESSED THROUGH	SPECIFICS/REFERENCE 04 DEV APPLCN GROUP	QTY/AMT		ITEM 0080 ZONE	SPECIFICS/REFERENCE Z062 DD	QTY/AMT	
PERMITS REQUIRED IF THIS APPLICATION IS APPROVED INCLUDE: CLEARANCES REQUIRED DURING APPLICATION STAGE INCLUDE:				BUILDING PLAN REGISTRY DIAC REVIEW STUDY AREA ST71 DE01 DEV COST LEVY REVW DOWNTOWN SOUTH			
PCT REVIEW TARGET DATES HERITAGE REVIEW				ENGINEERING REVIEW STUDY AREA ST64			
PROCESSED BY: APPLICATION TAKEN BY D MCCONACHIE PLANNING PLAN CHECKER IS B WESTMACOTT				APPLICATION TYPED BY A MARTIN			
COMMENTS:							
FEE 152 DEV SCHED 4 (B)		AMOUNT 270.00		FEE		AMOUNT	
				DEPARTMENT		PL-DATA RESOURCE	
				ATTENTION		CENTRAL PPTY FILE	
				REASON		CENTRAL PROPERTY FILE	
				SIGNED BY		s.22(1)	
				DATE		SEE INFORMATION SHEET	
INVOICE: 109322		TOTAL		\$270.00			

DE 401793
OCT 10

CITY OF VANCOUVER
DEVELOPMENT AND BUILDING

Application Form

To help expedite submission of your application, please fill out both sides of this information sheet prior to attending the Application Preview counter.

JOB LOCATION

Correct and complete addressing is important. Complete this section carefully

Address: 869 HAMILTON Floor Level: _____ Suite No: _____
Legal Description: _____

Lot(s) 24 Block(s) 66 District Lot(s) 541 Plan Number(s) 210

(LIST ALL AFFECTED ADDRESSES FOR THIS PROJECT - IF MORE THAN ONE SITE OR ADDRESS IS INVOLVED, SEE THE RECEPTIONIST FOR ADDITIONAL SITE IDENTIFICATION FORM.)

Are you aware of the presence of any contaminated soils on the subject property? Yes ☐ No ☒
Are You aware of the existence of any contaminated soils studies, reports soiled agreements, or Ministry of Environment orders or letters with respect to the subject property? Yes ☐ No ☒

This area must be completed by the person signing the application form.

Your Name: s.22(1)
Mailing Address: s.22(1)
City: VANCOUVER
Postal Code: s.22(1)
Phone Number: s.22(1)
Company Name: LE NAPOLEON
Business License Account Number: _____

You are the:

- 01 ☒ Property Owner
02 ☐ Contractor
03 ☐ Certified Professional
04 ☐ Design Professional
05 ☐ Tenant
06 ☐ Agent for Owner
07 ☐ Agent for Tenant
08 ☐ Consultant
09 ☐ Non-profit Association
10 ☐ Civic Department
98 ☐ Other

NOTE: CONTRACTORS/DESIGN PROFESSIONALS/CONSULTANTS MUST HAVE A VALID BUSINESS LICENSE TO DO WORK IN THE CITY OF VANCOUVER. YOU MAY OBTAIN CURRENT BUSINESS LICENSE ACCOUNT NUMBERS FROM THE BUSINESS LICENSE COUNTER.

Complete the following for all applications

Property Owner's Name: s.22(1)
Address: s.22(1) City: VANCOUVER
Postal Code: s.22(1) Phone Number: s.22(1)

Is the owner aware of this application? Yes ☒ No ☐

Contractor's Name: _____
Address: _____ City: _____
Postal Code: _____ Phone Number: _____
Business License Account Number: _____

Tenant's Name: VILLA DEL LUPO
Address: 869 HAMILTON ST City: VANCOUVER
Postal Code: V6B 2R7 Phone Number: 6887436

Job Contact: ROBERT NAGENAS
Address: 1231 Adderley St. City: North Vancouver
Postal Code: V7L 1T6 Phone Number: 736 4431 EXT 333

DESCRIPTION OF WORK TO BE DONE:

(Check all that are applicable)

This application is to:

- 001 ☐ Construct a new building(s)
 002 ☒ Add to an existing building
 003 ☒ Alter the interior/exterior
 004 ☒ Add to a building and alter the existing portion
 005 ☐ Add to a building and change the use
 006 ☐ Add to the building, alter existing portion & change use
 007 ☐ Interior/exterior alterations and change of use
 008 ☐ Enclose an area of an existing building (Balcony enclosures)
 013 ☐ Multi-purpose development
 014 ☐ Change of use
 015 ☒ Retain Use
 016 ☐ Alter Grade (Raise or lower grade)
 022 ☐ Alterations to legalize a suite
 023 ☐ Alterations for a new suite
 026 ☐ Demolish
 ☐ Commercial
 ☐ Fire Damaged Building
 ☐ Non-rental One Family Dwelling
 ☐ Heritage Building
 ☐ Residential Rental Building
 030 ☐ Construct a garage/carport
 031 ☐ Add/Alter/Demo Garage/Carport
 041 ☐ Move building from another site
 042 ☐ Move building on the same site
 043 ☐ Install a pool, fence, tennis court, boat ramp, sign, or similar
 044 ☐ Upgrade seismic and/or sprinkler
 045 ☐ Mechanical kitchen exhaust, roof top unit, satellite dish
 046 ☐ Prefabricated structure placed on site
 047 ☐ Fire damage repair
 048 ☐ Flood damage repair
 050 ☐ Landscape only

Is this a new tenant? NO

Existing use? RESTAURANT

Proposed use? SAME

How many storeys? 2 PLUS BASEMENT

How many levels of underground parking? —

How many rooftop units? N/A

(Complete carefully - your application will be based on your written description)

Describe work to be done:

- TO ADD A FULL HEIGHT STORAGE
FACILITY UNDERNEATH THE EXISTING
KITCHEN. APPROX. 900A
 - PLACE A PROPER SITE DRAINAGE
SYSTEM ON SITE
 - PROVIDE A SERVICE STAIR TO SECOND
FLOOR & NEW STORAGE
 - TO MAKE FIRE EXITS MORE DIRECT
FROM EACH FLOOR

OFFICE USE ONLY		INVOICE #	
		BU	
		DE	<u>102272</u>
WHAT IS THE VALUE OF THE WORK PROPOSED \$ <u>38 500.00</u>		BU	
(Include cost of plans, material and labour)		DE	<u>375.00</u>
Will any of the following be altered/ repaired/ installed?		DT	
<input checked="" type="checkbox"/> Electrical	<input checked="" type="checkbox"/> Gas	EG	<u>FM \$</u>
<input checked="" type="checkbox"/> Plumbing	<input type="checkbox"/> Sprinkler	EUP	
	<input checked="" type="checkbox"/> Drain Tile	SUB TOTAL	
	<input type="checkbox"/> Fire Alarm	SP	
Sprinkler Contractor's Name: _____		TOTAL	<u>375.00</u>
Special Sprinkler Inspection Number SP _____			

Complete the following for all Residential Buildings:		Complete the following related Permit Information	
	Existing	Proposed	<u>RELATED DP</u>
Total number of dwelling units:	_____	_____	Development Permit/ Application Number <u>DE 213418</u>
Total number of housekeeping units:	_____	_____	Minor Amendment Number DE _____
Total number of sleeping units:	_____	_____	Building Permit/ Application Number BU _____
Will you be strata titling Yes <input type="checkbox"/> No <input type="checkbox"/>			Board of Variance Appeal Number Z _____
			Combined Permit DB _____

As owner or owner's agent, I have verified that the information contained within this document and association applications and plans is correct, and describes a use, a building or a work which complies with all relevant by-laws and statutes. I acknowledge that responsibility for by-law compliance rests with the owner and the owner's employees, agents and contractors. I will indemnify and save harmless the City of Vancouver, its officials, employees and agents against all claims, liabilities and expenses of every kind, in respect of anything done or not done pursuant to this application or fact sheet or ensuing permit, including negligence and/or the failure to observe all by-laws, acts or regulations.

SIGNED AT VANCOUVER, B.C. THIS 10 DAY OF OCTOBER 1992

City of Vancouver 501 2022248 - Page 30 of 55

SIGNATURE OF APPLICANT



**FIRE & RESCUE SERVICES
FIRE PREVENTION DIVISION**

April 22, 2008

John S. Piamonte
404-555 Sixth Street
New Westminster, B.C.
V3L 5H1

Attention: John S. Piamonte

Dear Sir/Madam:

Re: 869 Hamilton Street, Vancouver, B.C.

An inspection was conducted on the above-mentioned address on April 22, 2008 by FPI Martin Rusticus. Violations were noted and orders were issued. We have received authorization from Eleftherios Manoussakis to release information pertaining to the outstanding orders. In summary they are:

1. Service and upgrade kitchen suppression system.*
* Must be conducted by a qualified ASTTBC Technician.

An inspector will be re-visiting the address, and should the orders not be complied with at the time of inspection, a fee of \$100.00 will be charged.

Neither the City of Vancouver, nor the party signing below warrants or guarantees the accuracy or completeness of the above information. The information is provided on the following conditions:

- (a) that neither the City nor the party signing below shall be liable for any damage or expense should, for any reason including negligence on the part of the City or the party signing below, the information be inaccurate, incomplete or misleading; and
- (b) that should any or all of the information be inaccurate, incomplete or misleading, for any reason including negligence on the part of the City or the party signing below, the City shall, as against any person or corporation who may rely on the contents of this letter, be able to assert and enforce its full legal rights as if this letter had not been signed and as if any and all persons and corporations who may rely on the contents of this letter had not relied on the contents of this letter.

I trust this is the information you require.

Yours truly,

A handwritten signature in black ink, appearing to read "Naomi Wolf".

Naomi Wolf
Clerk II, Fire Prevention Division

"PEOPLE WHO CARE ABOUT YOU"

June 1, 2018

File Number: BG-2018-00074
Please refer: Mike Panganiban
(604) 873-7316

Ted Murray DBA: Ted Murray Architect Inc.
224-1628 West 1st Avenue
Vancouver, BC, V6J 1G1

Dear Ted Murray DBA: Ted Murray Architect Inc.:

RE: Building Grades for LOT 24 BLOCK 66 DISTRICT LOT 541 PLAN 210

In response to your request for the above dated April 2, 2018, I am attaching a PDF copy of our Plan BG-2018-00074 dated May 29, 2018, showing the established elevations along the property lines of the above referenced property.

Building grades are supplied by the City to show the permanent design grade of the pavement, boulevard, sidewalk or other street improvements at the property line. If your development does not meet these grades exactly, it may not be possible to accommodate the differences on the City street. This means that any steps or ramps that would be required at your entrances, or any retaining structure required to support a grade difference at the property line, now or in the future, may have to be constructed entirely on your property and your expense. If your entrances are below the building grades we give you, then the City will not take responsibility for any surface water that may drain from the street or boulevard into your entrances.

To minimize grade differences, a continuous building grade is to be interpolated between the points given on the attached plan. All portions of your proposed development such as entrances, exits, walls, or pedestrian plazas, which will abut the City's sidewalk or boulevard, must meet this grade line. Any alterations required due to improper alignment with these grades will be at the expense of the owner. Therefore, please take this matter into consideration regarding the importance of grades.

In this regard, please ensure that all building grade elevations are shown on the development plans submitted for this property and show how your design elevations of all vehicle and pedestrian entrances, plazas, support structures and general site grading meet these grades. Any differences, of course, would mean that your development permit will be held up until a satisfactory explanation is forthcoming.

APPROXIMATION

The Building Grades are as follows:

- On Hamilton St. - approximately 17cm higher than the existing concrete curb;
- On the Lane - approximately 9cm higher than the existing pavement centreline.

CONSTRUCTION

Note: Construction to the building grades issued may also necessitate in the reconstruction adjacent to your site. Should you require further information on street or lane reconstructions that may be required due to your development, please contact Dan Walker of the engineering Development Services Branch at telephone 604-871-6935.

Including a copy of the building grade drawing with your development permit drawings will assist us in processing your application more quickly. Please feel free to contact us at building.grades@vancouver.ca or call (604) 873-7316 if you have any questions or would like more information.

Sincerely,

Mike Panganiban

Signed on behalf of:

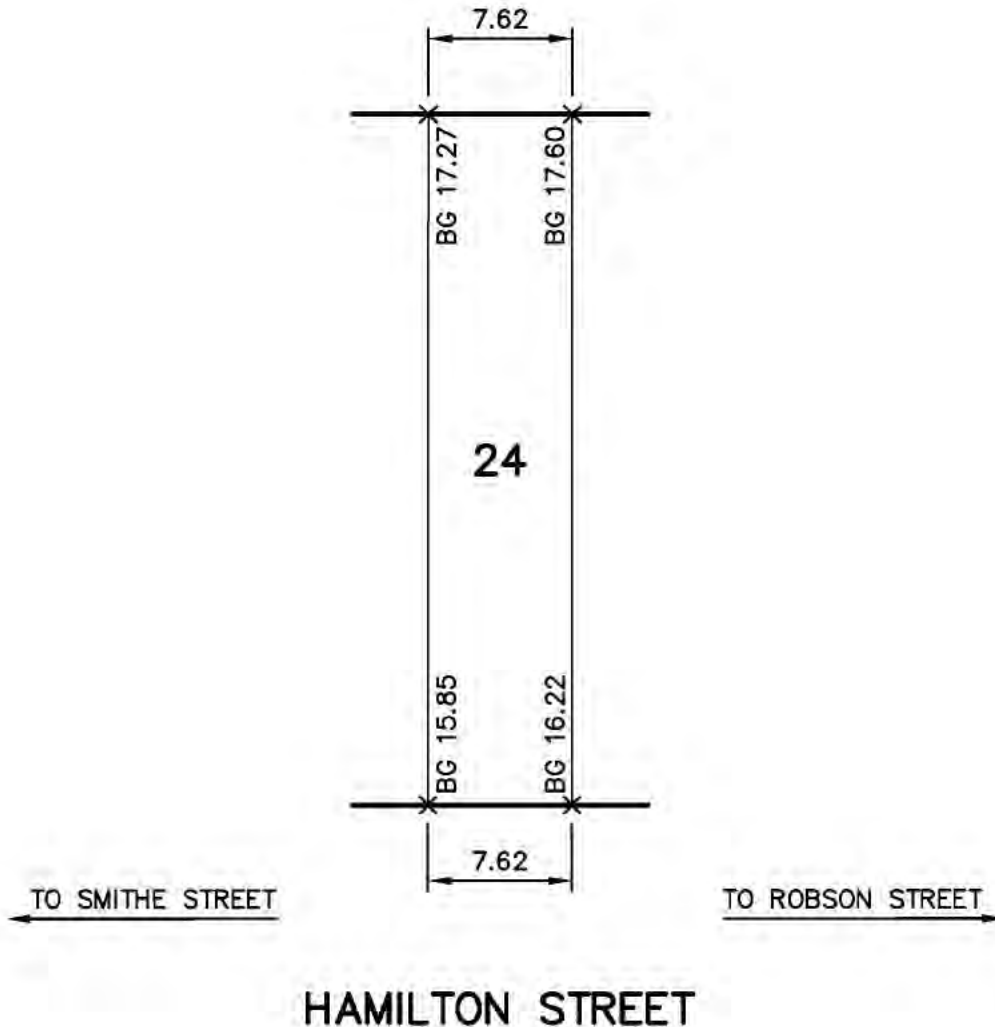
Joyce Lee, P.Eng.

Streets Engineer

Streets and Electrical Design

Attachment: Copy of Accepted Building Grade Plan

LANE WEST OF HAMILTON STREET



BENCH MARK ELEVATION: 13.58 DESCRIPTION: SURVEY MONUMENT MARKED V-1910 AT THE SOUTH WEST CORNER OF MAINLAND STREET AND SMITHE STREET.

ATTENTION

ELEVATIONS SHOWN ON THIS PLAN ARE IN METRES
BASED ON GVRD DATUM (ISSUED MARCH 31, 2005).
DIMENSIONS ARE ALSO IN METRES.

THE CITY OF VANCOUVER ASSUMES NO RESPONSIBILITY FOR PROPERTY DIMENSIONS SHOWN ON THIS PLAN



CITY OF VANCOUVER ENGINEERING SERVICES

SCALE: 1:400

DATE: 2018-05-29

REF: FILE 2018-00074.

**BUILDING GRADE ELEVATIONS
FOR LOT 24, BLK. 66,
D.L. 541, PLAN VAP210.**

DESIGN: M.P. DWG: D.T.

CHK: J.D.H. REV:

BG-2018-00074

April 5, 2018

File Number: BG-2018-00074
Please refer: Mike Panganiban
(604) 873-7316

Ted Murray DBA: Ted Murray Architect Inc.
224-1628 West 1st Avenue
Vancouver, BC, V6J 1G1

Dear Ted Murray DBA: Ted Murray Architect Inc.:

RE: Initial Review - Building Grades for LOT 24 BLOCK 66 DISTRICT LOT 541 PLAN 210

Thank you for submitting your building grade application dated April 2, 2018 for the above referenced location. We have reviewed your application and site information and concluded that, for this location, the City will complete the building grade design due to possible future road improvements.

In order to complete your building grade design, a payment of the building grade design fee is now required. For your site, the building grade design fee is \$1,010.00 in addition to the initial review fee you already paid. This fee covers the additional costs for survey and design work required to complete City building grade designs.

Please pay the above fee using our online permit system or return the attached form with payment in person to:

Engineering Services (5th Floor), 320-507 West Broadway, Vancouver, BC, V5Z 0B4

Please note that the final building grade plan will not be sent to you until the above fee is received.

The City designed building grades are expected to be completed and sent to you within 4-6 weeks. Please visit vancouver.ca/buildinggrades or feel free to contact us at building.grades@vancouver.ca if you have any questions or would like more information.

Sincerely,

Mike Panganiban
Streets Designer
Streets and Electrical Design

DE 401994
DEC. 20

CITY OF VANCOUVER
DEVELOPMENT AND BUILDING

Dec. 27
10:30

Application Form

To help expedite submission of your application, please fill out both sides of this information sheet prior to attending the Application Preview counter.

JOB LOCATION *Correct and complete addressing is important. Complete this section carefully*

Address: 869 HAMILTON ST Floor Level: Suite No:

Legal Description:

Lot(s) 24 Block(s) 66 District Lot(s) 541 Plan Number(s)

(LIST ALL AFFECTED ADDRESSES FOR THIS PROJECT - IF MORE THAN ONE SITE OR ADDRESS IS INVOLVED, SEE THE RECEPTIONIST FOR ADDITIONAL SITE IDENTIFICATION FORM.)

Are you aware of the presence of any contaminated soils on the subject property? Yes ☐ No ☐
Are You aware of the existence of any contaminated soils studies, reports soiled agreements, or Ministry of Environment orders or letters with respect to the subject property? Yes ☐ No ☐

This area must be completed by the person signing the application form.

Your Name: s.22(1)
Mailing Address: s.22(1)
City: VANCOUVER B.C.
Postal Code: s.22(1)
Phone Number: s.22(1)
Company Name: LE NAPOLEON REST
Business License Account Number:

You are the:

- 01 ☒ Property Owner
02 ☐ Contractor
03 ☐ Certified Professional
04 ☐ Design Professional
05 ☐ Tenant
06 ☐ Agent for Owner
07 ☐ Agent for Tenant
08 ☐ Consultant
09 ☐ Non-profit Association
10 ☐ Civic Department
98 ☐ Other

NOTE: CONTRACTORS/DESIGN PROFESSIONALS/CONSULTANTS MUST HAVE A VALID BUSINESS LICENSE TO DO WORK IN THE CITY OF VANCOUVER. YOU MAY OBTAIN CURRENT BUSINESS LICENSE ACCOUNT NUMBERS FROM THE BUSINESS LICENSE COUNTER.

Complete the following for all applications

Property Owner's Name: s.22(1)
Address: s.22(1) City VANC. B.C.
Postal Code: s.22(1) Phone Number: s.22(1)

Is the owner aware of this application? Yes ☒ No ☐

Contractor's Name:
Address: City:
Postal Code: Phone Number:
Business License Account Number:

Tenant's Name:
Address: City:
Postal Code: Phone Number:

Job Contact:
Address: City:
Postal Code: Phone Number:

DESCRIPTION OF WORK TO BE DONE:

(Check all that are applicable)
This application is to:

- 001 ☐ Construct a new building(s)
- 002 ☐ Add to an existing building
- 003 ☐ Alter the interior/ exterior
- 004 ☐ Add to a building and alter the existing portion
- 005 ☐ Add to a building and change the use
- 006 ☐ Add to the building, alter existing portion & change use
- 007 ☐ Interior/ exterior alterations and change of use
- 008 ☐ Enclose an area of an existing building (Balcony enclosures)
- 013 ☐ Multi-purpose development
- 014 ☐ Change of use
- 015 ☐ Retain Use
- 016 ☐ Alter Grade (Raise or lower grade)
- 022 ☐ Alterations to legalize a suite
- 023 ☐ Alterations for a new suite
- 026 ☐ Demolish
 - ☐ Commercial
 - ☐ Fire Damaged Building
 - ☐ Non-rental One Family Dwelling
 - ☐ Heritage Building
 - ☐ Residential Rental Building
- 030 ☐ Construct a garage/ carport
- 031 ☐ Add/ Alter/ Demo Garage/ Carport
- 041 ☐ Move building from another site
- 042 ☐ Move building on the same site
- 043 ☒ Install a pool/ fence/ tennis court, boat ramp, sign, or similar
- 044 ☐ Upgrade seismic and/ or sprinkler
- 045 ☐ Mechanical kitchen exhaust, roof top unit, satellite dish
- 046 ☐ Prefabricated structure placed on site
- 047 ☐ Fire damage repair
- 048 ☐ Flood damage repair
- 050 ☐ Landscape only

Is this a new tenant? NO
Existing use? RESTAURANT
Proposed use? 1
How many storeys? _____
How many levels of underground parking? _____
How many rooftop units? _____

(Complete carefully - your application will be based on your written description)

Describe work to be done:

TO INSTALL AN
OVERHEIGHT FENCE

<p>OFFICE USE ONLY</p> <hr/> <p>WHAT IS THE VALUE OF THE WORK PROPOSED \$ _____ (Include cost of plans, material and labour)</p> <hr/> <p>Will any of the following be altered/ repaired/ installed?</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Electrical</td> <td><input type="checkbox"/> Gas</td> <td><input type="checkbox"/> Drain Tile</td> </tr> <tr> <td><input type="checkbox"/> Plumbing</td> <td><input type="checkbox"/> Sprinkler</td> <td><input type="checkbox"/> Fire Alarm</td> </tr> </table> <p>Sprinkler Contractor's Name: _____</p> <p>Special Sprinkler Inspection Number SP _____</p>	<input type="checkbox"/> Electrical	<input type="checkbox"/> Gas	<input type="checkbox"/> Drain Tile	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Sprinkler	<input type="checkbox"/> Fire Alarm	<p>INVOICE #</p> <p>BU _____</p> <p>DE <u>109322</u></p> <hr/> <p>BU _____</p> <p>DE <u>270.-</u></p> <p>DT _____</p> <p>BQ <u>FM 1</u></p> <p>EUP _____</p> <p>SUB TOTAL _____</p> <p>SP _____</p> <p>TOTAL <u>270.-</u></p>
<input type="checkbox"/> Electrical	<input type="checkbox"/> Gas	<input type="checkbox"/> Drain Tile					
<input type="checkbox"/> Plumbing	<input type="checkbox"/> Sprinkler	<input type="checkbox"/> Fire Alarm					

<p>Complete the following for all Residential Buildings:</p> <table style="width: 100%;"> <tr> <th></th> <th>Existing</th> <th>Proposed</th> </tr> <tr> <td>Total number of dwelling units:</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Total number of housekeeping units:</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Total number of sleeping units:</td> <td>_____</td> <td>_____</td> </tr> </table> <p>Will you be strata-titling? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>		Existing	Proposed	Total number of dwelling units:	_____	_____	Total number of housekeeping units:	_____	_____	Total number of sleeping units:	_____	_____	<p>Complete the following related Permit Information</p> <p>Development Permit/ Application Number DE _____</p> <p>Minor Amendment Number DE _____</p> <p>Building Permit/ Application Number BU _____</p> <p>Board of Variance Appeal Number Z _____</p> <p>Combined Permit DB _____</p>
	Existing	Proposed											
Total number of dwelling units:	_____	_____											
Total number of housekeeping units:	_____	_____											
Total number of sleeping units:	_____	_____											

As owner or owner's agent, I have verified that the information contained within this document and association applications and plans is correct, and describes a use, a building or a work which complies with all relevant by-laws and statutes. I acknowledge that responsibility for by-law compliance rests with the owner and the owner's employees, agents and contractors. I will indemnify and save harmless the City of Vancouver, its officials, employees and agents against all claims, liabilities and expenses of every kind, in respect of anything done or not done pursuant to this application or fact sheet or ensuing permit, including negligence and/ or the failure to observe all by-laws, acts or regulations.

SIGNED AT VANCOUVER, B.C. THIS 20th DAY OF Dec 19 96

City of Vancouver 2022-248 - Page 37 of 55

SIGNATURE OF APPLICANT



CITY OF VANCOUVER
COMMUNITY SERVICES GROUP
Licences & Inspection
Licence Department
Tel. No. (604) 873-7568
Fax No. (604) 871-6394

BUSINESS LICENCE APPLICATION FORM

Date:

MAY 31/05

☐ New Licence Application ☒ Transfer ☐ Other

☐ Commercial/Industrial ☐ Home Based ☐ Out-of-Town ☐ Kiosk ☐ Non-Profit

BUSINESS ADDRESS: 869 HAMILTON VAN BC V6B 2R2
(Including Postal Code)

MAILING ADDRESS: _____
(Only if different from the above address)

TYPE OF BUSINESS: RESTURANT

Please describe in detail the nature of your business and the intended use of the premise (both primary and ancillary):

BUSINESS OWNER (S): Please present one form of current photo identification upon application. If a business address is from a Vancouver residential address, a proof of address is required. If a representative is applying for the business licence, a letter of authorization is required upon application.

1. NIKOLAOS MANOISSAKIS
(PRINT NAME)

Date of Birth:

s.22(1)

☒ Driver's Licence

ID No.

s.22(1)

☐ Passport

ID No.

☐ BCID

ID No.

☐ Other

ID No.

BUSINESS PHONE NO:

604 698 7436

HOME PHONE NO:

FAX NO:

CELLULAR PHONE NO.

☒ Canadian Citizen

☐ Landed Immigrant/Permanent Residence

☐ Working Visa

2.

(PRINT NAME)

Date of Birth:

☐ Driver's Licence

ID No.

☐ Passport

ID No.

☐ BCID

ID No.

☐ Other

ID No.

BUSINESS PHONE NO:

HOME PHONE NO:

FAX NO:

CELLULAR PHONE NO.

☐ Canadian Citizen

☐ Landed Immigrant/Permanent Residence

☐ Working Visa

3. _____ Date of Birth: _____
 (PRINT NAME)
☐ Driver's Licence ID No. _____ ☐ Passport ID No. _____
☐ BCID ID No. _____ ☐ Other ID No. _____
 BUSINESS PHONE NO: _____ HOME PHONE NO: _____
 FAX NO: _____ CELLULAR PHONE NO: _____
☐ Canadian Citizen ☐ Landed Immigrant/Permanent Residence ☐ Working Visa

INCORPORATED OR LIMITED COMPANY NAME: (If Incorporated or Limited, a copy of the certificate is required to process the licence or a service charge will be applied to verify company registration.)

Villa Del Lupo Restaurant Ltd Certificate Number: BC 0724872

DOING BUSINESS AS/BUSINESS TRADE NAME:


Villa Del Lupo

PLEASE COMPLETE THE FOLLOWING INFORMATION

Business Start Date: JUNE / 01 / 2005
 Number of Employees: 12 Number of Vending Machines: _____ Number of Bank Machines: _____
 If Restaurant or Limited Food Establishment: Number of Seats: 100 Outdoor Seating: ☐ Yes ☒ No
 Have you previously held a Business Licence in Vancouver? ☐ Yes ☒ No When? _____
 If yes, Name Of Previous Business: _____
 Address of Previous Business: _____
 Trades Qualification Number (for Contractors Use Only) _____

APPLICANT STATEMENT

I/We the undersigned confirm as the business owner(s)/agent for the owner(s) that the above-noted information is correct and agrees to comply with ALL relevant provisions of the License By-law No. 4450 and other applicable City By-laws. It is also understood that the business owner(s) is/are responsible for the overall management of the business including staff while representing the owner's business. Further, failure to meet these obligations may result in the business licence being suspended or reported to City Council for possible revocation.

 Signature <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Representative	<u>MANOUSSAKIS</u> Print Last Name	<u>MAY / 31 / 05</u> Date
_____ Signature	_____ Print Last Name	_____ Date
_____ Signature	_____ Print Last Name	_____ Date
_____ Signature	_____ Print Last Name	_____ Date

LICENCE DEPARTMENT USE ONLY

APPROVALS: Zoning ☐ Required ☒ Not Required Building ☐ Required ☒ Not Required
 Health ☒ Required ☐ Not Required Police ☐ Required ☒ Not Required

CLASSIFICATION(S):

- Restaurant-Class 1
- Dining Lounge

Licence Number: 05-188559 RR
 Licence Number: 05-188560 DQ

☐ Letter of Authorization sent to DOMINO

LICENSE OFFICE
City Hall, East Wing
453 West 12th Avenue
Vancouver, British Columbia
Canada V5Y 1V4
Phone (604) 873-7568

CITY OF VANCOUVER



\$ 103.00 Per License

APPLICATION FOR TRANSFER

License Year 2005

License Number(s) 05-140711 RR
05-140710 DD

TO BE COMPLETED BY NEW OPERATOR:

Name of Applicant: NIKOLAOS MANOUSSAKIS

Name of Business: Villa Del Lupo

Address of Business: 869 HAMILTON ST VAN

Address of Applicant: [REDACTED]

Phone Number: Business 604 688 7436 Home [REDACTED]

Date of occupancy or transfer of licensed premises JUNE / 01 / 2005

I, NIKOLAOS MANOUSSAKIS hereby make application for the transfer of the business license in accordance with the particulars as stated above and declare that the above statement is true and correct and I undertake that if I am granted the transfer of the license applied for I will comply with each and every obligation contained in all laws and bylaws now in force or which hereinafter come into force in the City of Vancouver.

Signature of Applicant [Signature] Dated May / 31 / 05

TO BE COMPLETED BY EXISTING LICENSE HOLDER:

I hereby agree to transfer (subject to approval of the License Office) all my right and interest in the above mentioned

Business License at: 869 Hamilton St Vancouver BC V6B2R7

Type of Business: Restaurant Type class 1 BTRR

to Manoussakais Nikolaos

Signature of License Holder [Signature] Dated May 31/05

Please print name Jubio GONZALEZ



CITY OF VANCOUVER

Planning

DEVELOPMENT COST LEVY APPLICATION

ADDRESS: 267 Hamilton St.

DATE: 96.11.21

DEVELOPMENT PERMIT #: 401793

BUILDING # USE

Restaurant

GROSS FLOOR AREA
(FOR D.C.L. PURPOSES)

375 ft²

PCT SIGNATURE [Signature]

PRINT NAME: Steve Harris

ADDRESS: _____

DATE: _____

DEVELOPMENT PERMIT #: _____

M.A. #: _____

BUILDING # USE

GROSS FLOOR AREA
(FOR D.C.L. PURPOSES)

[These calculations supercede any previous calculations regarding this D.P.]

PCT SIGNATURE _____

PRINT NAME: _____

PROPERTY ADDRESS FILE COPY

Data Resource Centre
Permits & Licenses Department
City of Vancouver
453 W. 12th Ave. (East Wing)
Vancouver, BC.
V5Y 1V4
Ph: 873-7537
Fax: 873-7100

Re: 869- HAMILTON ST.
(address)

I hereby declare that I am the registered owner of the above-noted property, and wish to view and/or copy any building plans held in your possession.

Name (please print):

Address:

Telephone:

Signature:

s.22(1)

s.22(1)

s.22(1)

s.22(1)

Receipt No:

Initial:

s.22(1)

I request the City to make copies on my behalf and I agree to hold harmless and indemnify the City of Vancouver in respect of any claim that may arise therefrom. I intend to use these copies for purposes of private study, research, criticism, review or newspaper summary and I understand that any other use may infringe one or more provisions of the copyright act.

BCDL #

s.22(1)



COMMUNITY SERVICES GROUP
Licence & Inspections
Licence Division
453 West 12th Avenue,
Vancouver, BC, V5Y 1V4
Tel. No. (604) 873-7568
Fax No. (604) 871-6394

BUSINESS LICENCE APPLICATION FORM

Date: 10.20.09

☒ Commercial/Industrial ☐ Home Based ☐ Out-of-Town ☐ Kiosk ☐ Non-Profit

BUSINESS ADDRESS: 869 Hamilton St U6B 2R7
(Including Postal Code)

MAILING ADDRESS: _____
(Only if different from the above address)

TYPE OF BUSINESS: Restaurant

Please describe in detail the nature of your business and the intended use of the premise (both primary and ancillary):

- Dining establishment
- with wine & liquor

BUSINESS OWNER (S): Please present one form of current photo identification upon application. If a business address is from a Vancouver residential address, a proof of address is required. If a representative is applying for the business licence, a letter of authorization is required upon application.

1. Michael Marmeli s.22(1)
(PRINT NAME) s.22(1) Date of Birth: s.22(1)
☒ Driver's Licence ID No. s.22(1) ☐ Passport ID No. _____
☐ BCID ID No. _____ ☐ Other ID No. _____
BUSINESS PHONE NO: 604 569 2535 s.22(1) HOME PHONE NO: s.22(1)
FAX NO: 604 569 2537 s.22(1) CELLULAR PHONE NO: s.22(1)
☒ Canadian Citizen ☐ Landed Immigrant/Permanent Residence ☐ Working Visa

2. _____
(PRINT NAME) Date of Birth: _____
☐ Driver's Licence ID No. _____ ☐ Passport ID No. _____
☐ BCID ID No. _____ ☐ Other ID No. _____
BUSINESS PHONE NO: _____ HOME PHONE NO: _____
FAX NO: _____ CELLULAR PHONE NO: _____
☐ Canadian Citizen ☐ Landed Immigrant/Permanent Residence ☐ Working Visa

3. _____ Date of Birth: _____
 (PRINT NAME)
☐ Driver's Licence ID No. _____ ☐ Passport ID No. _____
☐ BCID ID No. _____ ☐ Other ID No. _____
 BUSINESS PHONE NO: _____ HOME PHONE NO: _____
 FAX NO: _____ CELLULAR PHONE NO: _____
☐ Canadian Citizen ☐ Landed Immigrant/Permanent Residence ☐ Working Visa

INCORPORATED OR LIMITED COMPANY NAME: (If Incorporated or Limited, a copy of the certificate is required to process the licence or a service charge will be applied to verify company registration.)

Assaggio Restaurant + Vinoteca Ltd Certificate Number: BC0862015

DOING BUSINESS AS/BUSINESS TRADE NAME:

Lupo Restaurant + Vinoteca

PLEASE COMPLETE THE FOLLOWING INFORMATION

Business Start Date: opening early December. NOV 20/09
 Number of Employees: 15 Number of Vending Machines: _____ Number of Bank Machines: _____
 If Restaurant or Limited Food Establishment: Number of Seats: 90 Outdoor Seating: ☐ Yes ☒ No
 Have you previously held a Business Licence in Vancouver? ☐ Yes ☒ No When? _____
 If yes, Name Of Previous Business: _____
 Address of Previous Business: _____
 Trades Qualification Number (for Contractors Use Only) _____

APPLICANT STATEMENT

I/We the undersigned confirm as the business owner(s)/agent for the owner(s) that the above-noted information is correct and agrees to comply with ALL relevant provisions of the License By-law No. 4450 and other applicable City By-laws. It is also understood that the business owner(s) is/are responsible for the overall management of the business including staff while representing the owner's business. Further, failure to meet these obligations may result in the business licence being suspended or reported to City Council for possible revocation.

<u>[Signature]</u> Signature <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Representative	<u>Mameli</u> Print Last Name	<u>Nov 20/09</u> Date
_____ Signature	_____ Print Last Name	_____ Date
_____ Signature	_____ Print Last Name	_____ Date
_____ Signature	_____ Print Last Name	_____ Date

LICENCE DEPARTMENT USE ONLY

APPROVALS: Zoning ☐ Required ☒ Not Required Building ☐ Required ☒ Not Required
 Health ☐ Required ☐ Not Required Police ☐ Required ☒ Not Required

CLASSIFICATION(S):

1. Restaurant Class 1 Licence Number: 09-246572
 2. Dining Lounge Licence Number: 09-246576

☐ Letter of Authorization sent to DOMINO

PERMIT TYPE		DEVELOPMENT PERMIT APPLICATION				APPLICATION NUMBER A DE 401793	
LEGAL DESCRIPTION Lot 24 Blk 66 Plan 210 DL 541						ADDRESS 869 HAMILTON ST	
ADDITIONAL ADDRESS INFORMATION						SPECIFICS	
APPLICATION DATE OCT 10, 1996	PURPOSE ADD/ALTER	PROJECT VALUE	ASSESSED VALUE \$14,700	PLANS 5	METRIC NO	PLACE NAME	
HERITAGE DESIGNATION	HERITAGE STATUS C: CONTEXTUAL	TEMPORARY USE DATES				SUBTYPE	
APPLICANT PROPERTY OWNER LE NAPOLEON VANCOUVER BC						CONTACT 2 TENANT VILLA DEL LUPO 869 HAMILTON ST. VANCOUVER BC	
CONTACT 3 AGENT FOR OWNER ROBERT DAGENAIS 1231 ADDERLEY ST. NORTH VANCOUVER BC						CONTACT 3 AGENT FOR OWNER ROBERT DAGENAIS 1231 ADDERLEY ST. NORTH VANCOUVER BC	
TEL 8.22(1)	BUS LICENSE CERTIFICATE	TEL 688-7436	BUS LICENSE CERTIFICATE	TEL 736-4431	BUS LICENSE CERTIFICATE	FAX	
<p>THIS APPLICATION IS SUBMITTED WITH PLANS TO:</p> <p>To add to and alter this existing heritage "C" Restaurant-Class 1 building with an approx. 627.0 sf rear basement addition to provide storage, an approx 135.0 sf rear main floor and an approx 125.0 sf rear second floor additions to provide new stairs for an existing Restaurant-Class 1 tenant.</p>							
PROPOSED USE 870 RESTAURANT (1)		SPECIFICS/LOCATION		AREA (SF)		OCC A2	
ITEM		SPECIFICS/REFERENCE		QTY/AMT		ITEM	
0037 LOT WIDTH				25.00 FT		0041 BY-LAW PROVISION	
0038 LOT DEPTH				120.00 FT		C - CONDITIONAL	
0040 PROCESSED THROUGH		04 DEV APPLCN GROUP				2062 DD	
PERMITS REQUIRED IF THIS APPLICATION IS APPROVED INCLUDE:				BUILDING			
CLEARANCES REQUIRED DURING APPLICATION STAGE INCLUDE:				PCT REVIEW			
				ENGINEERING REVIEW			
				DIAC REVIEW			
				STUDY AREA ST64			
				STUDY AREA ST71			
				HERITAGE REVIEW			
				DNO1 DEV COST LEVY REVW			
				DOWNTOWN SOUTH			
PROCESSED BY: APPLICATION TAKEN BY D BOGUE				APPLICATION TYPED BY B BALANTZIAN			
PLANNING PLAN CHECKER IS S HEARN				DEVELOPMENT PLANNER IS R ADAIR			
HERITAGE PLANNER IS G MCGROUGH							
<p>ADDITIONAL NOTES:</p> <p>020 THIS SITE IS AFFECTED BY A DEVELOPMENT COST LEVY BY-LAW. LEVIES WILL BE REQUIRED TO BE PAID PRIOR TO THE ISSUANCE OF BUILDING PERMITS.</p>							
COMMENTS:							
FEE		AMOUNT		FEE		AMOUNT	
138 DEV SCHED 3 (B)		375.00					
				DEPARTMENT		PL-DATA RESOURCE	
				ATTENTION		CENTRAL PPTY FILE	
				REASON		CENTRAL PROPERTY FILE	
				SIGNED BY		8.22(1)	
				DATE		SEE INFORMATION SHEET	
INVOICE: 102272				TOTAL		\$375.00	



Property Use Inspection Report

Page 1 of 1

IR Number	UI 44473	EN Number	EN 066532	Date of Inspection (yyyy/mm/dd)	2011/01/07
Main Address	869 HAMILTON ST.			Specifics and/or Suite #	
Secondary Address					
Tenant	LUPO RESTAURANT			Number of Storeys	N/A
Owner	LE NAPOLEON RESTAURANT (1979) LTD.			Permit Number	N/A
Agent	MICHAEL MAMELI @ 604-720-9032			Approved Use of Building/Land	RESTAURANT CLASS 1 WLS
District Zone	DD			Present Use of Building/Land	RESTAURANT CLASS1 WLS

Business License 11-148488 - RENEWAL

Reason for Inspection ON-LINE COMPLAINT

Narrative/Observations

INSPECTION TODAY SHOWED AN OUTDOOR SPEAKER INSTALLED UNDER THE ENTRANCE MARQUEE . AT TIME OF INSPECTION (JANUARY 6TH AT APPROX. 9:30 PM) THE SPEAKER WAS ON AND PLAYING THE “ NO SPEAK AMERICANO “ SONG .

I SPOKE WITH THE MANAGER WHO INTRODUCED HIMSELF AS CHRIS, GAVE HIM A VERBAL ORDER TO REMOVE THE OUTDOOR SPEAKER. HE INDICATED THAT HE WOULD HAVE TO TALK TO THE OWNER OF THE RESTAURANT, MICHAEL.

I WENT FOR RECHECK TODAY AT 2:15 PM AND THE SPEAKER WAS STILL UP .

RECHECK DONE ON TUESDAY JANUARY 11TH SHOWED THAT THE OUTDOOR SPEAKER HAS BEEN REMOVED . NO ACTION REQUIRED.

Requirements

Recommendations

FILE .

Photos Taken?	Yes	Digital Regular	No
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Date Report Made: January 7, 2011

Julio H. Araya
Inspector's Name

For Manager or Supervisor Use Only

File: Approval / Use Enforcement Project / Permit

FYA to:

FYI to:

TOM HAMILTON
Manager / Supervisor



MF-2017-00952
15pdf

DEVELOPMENT & BUILDING
SERVICES CENTRE

OWNER'S AUTHORIZATION
TO ACCESS PLANS FOR
NON-STRATA PROPERTY

RE: 869 HAMILTON

(Property Address)

I, LE NAPOLFON RESTE 4989 am the Registered Owner of
(print owner's name)

the above property, and hereby authorize PED MURRAY BRADLEY
(print authorized agent's name)

to access and obtain copies of any building plans relating to the above property on my behalf.

I am aware of the applicable fees herein.

Owner's Signature:

s.22(1)

Owner's Mailing Address:

s.22(1)

VANCOUVER

(City)

s.22(1)

(Postal Code)

Owner's Phone No:

s.22(1)

Cell:

s.22(1)

Owner's Email:

s.22(1)

DOC/2014/298846

xfma@telus.net

COVID-19 - Enforcement Request Case

Case number: 101014814064

Case created: 2021-02-19, 11:51:00 PM

Channel: WEB

Incident Location

Address: 869 HAMILTON ST, Vancouver, V6B 2R7

Address2:

Location name:

Original Address: 869 HAMILTON ST

Request Details

1. **Type of violation:***
Restaurant/pub serving alcohol after 10 PM
2. **Where is the violation occurring:***
Private Property - Business
3. **Confirm address where violation is occurring (including suite number, if applicable):***
869 HAMILTON ST
4. **When was the violation observed:***
feb 19, 2021
6. **If business is in violation, provide the business name:**
Lupo Restaurant
7. **If park or beach, provide name:**
8. **Provide details regarding the violation:***
s.22(1)
During my time there I counted at least 11 guests who were not wearing masks when walking to the washroom or leaving the restaurant. The worst part was that they'd walk right by staff who never reminded them and just turned a blind eye. While waiting for the women's washroom (a single person washroom), a couple emerged. They were from a private dining room celebrating a birthday. Though I could not see how the tables in there were set up, when they left, there were 7 of them congregating at the front door, waiting for taxis. We were not given a heads up of last call at 10pm and did not realize the time. s.22(1) we decided to try anyway and s.22(1) which they brought us. At 11pm there were only 2 tables remaining. At this point I saw 2 staff members without their masks on, walking about the restaurant. Unbelievable.
10. **Your name:**
s.22(1)
11. **Phone number:***
s.22(1)
12. **Email address:**
99. **Attachments**
0

Additional Details

Contact Details

Name: [REDACTED]

Address: ,

Address2:

Phone: s.22(1)

Alt. Phone:

Email:

Preferred contact method: Either

Case Notes

Photo

- no picture -

Noise Complaint

Case number: 101014985899

Case created: 2021-04-28, 05:48:00 PM

Channel: Phone

Incident Location

Address: 869 HAMILTON ST, Vancouver, V6B 2R7

Address2:

Location name:

Original Address:

Request Details

1. **Type of noise:**
Mechanical equipment (air conditioner, exhaust, heat pump, fan, vent, etc.)
2. **Describe the noise and who is making it (e.g. person or company name, garbage or recycling truck number, container bin number):**
Lupo Restaurant - 869 Hamilton
3. **When is it happening?**
From lunch time until the later evening hours (after dinner). Consistent, crank sound from HVAC unit. Sounds like a fan belt. Sometimes happens every 5 seconds, sometimes happens every 10 minutes. Loud banging sound.
4. **How often is it happening?**
Has been going on for 2.5 - 3 weeks.
5. **If noise is from mechanical equipment (e.g. air conditioner, fan, vent), where is it located on the property?**
At the rear of the property, at ground level, on the alley (presumably where the kitchen is located).
6. **Did you speak to the person or company making the noise?**
No
8. **Did you tell the police about your concern?**
No
11. **(Don't ask, just record - did caller indicate they want a call back?)**
Unknown

Additional Details

Contact Details

Name: s.22(1)

Address: ,

Address2:

Phone: s.22(1)

Alt. Phone:

Email:

Preferred contact method: Either

Case Notes

Photo

- no picture -

As Of: May 10, 2022 17:24:52

Case File: CF-2021-002511: Closed

311 Case File Ref	101014814064
Brief Description	Lupo Restaurant - COVID-19 - Enforcement Request
	Customers and staff are not wearing masks
Business License Number	
Completed Date	
Description	Case File CF-2021-002511: Closed (License By-law - Lupo Restaurant - COVID-19 - Enforcement Request Customers and staff are not wearing masks) 869 HAMILTON STREET, Vancouver, BC V6B 2R7
dup_DefaultInvestigator	Charlene Cranton, Property Use Inspector
dup_Fine	0.00
Enforcement Stream	
Findings	
Invoice Due Date	
Issue Date	
Job Location	
Location	
Location Description	
Location Type	Addressed
Parcel Owner is Defendant	N
Parent Job (Internal ID)	
PRISM BU Permit Number	
PRISM DB Permit Number	
PRISM DE Permit Number	
Proposed Investigator (Proposed Assignee)	
Reason for Case File	Complaint
Relationship	
STR CD	
Violation Updated Date	

Processes

Assign Investigation (Completed on Feb 23, 2021 11:13:21 by Ruby Parcon with outcome "Assigned")

May 10, 2022 17:25:14 j_LMS_CaseFile (ObjectId 142652648) Database: posprd Perform Investigation (Completed on Apr 7, 2021 10:30:48 by Charlene Cranton, Property Use Inspector with outcome "No Violation Found")

Additional Instructions

Comments

Description

Findings As indoor dining has been suspended as per the new PHO issued on March 29th, 2021, no enforcement required at this time. Re-investigation Date

Route Order

Assignments

Charlene Cranton, Property Use Inspector

Relationships

Document: 142652698

Enforcement Stream: Property Use

Investigator: Charlene Cranton, Property Use Inspector

Parcel: 015-458-903 - Parcel: 869 HAMILTON STREET, Vancouver, BC V6B 2R7

As Of: May 10, 2022 17:25:53

Case File: CF-2021-005950: Closed	
311 Case File Ref	101014985899
Brief Description	Mechanical noise - HVAC
Business License Number	
Completed Date	
Description	Case File CF-2021-005950: Closed (Noise By-law - Mechanical noise - HVAC) 869 HAMILTON STREET, Vancouver, BC V6B 2R7
dup_DefaultInvestigator	Charlene Cranton, Property Use Inspector
dup_Fine	0.00
Enforcement Stream	
Findings	
Invoice Due Date	
Issue Date	
Job Location	
Location	
Location Description	
Location Type	Addressed
Parcel Owner is Defendant	N
Parent Job (Internal ID)	
PRISM BU Permit Number	
PRISM DB Permit Number	
PRISM DE Permit Number	
Proposed Investigator (Proposed Assignee)	
Reason for Case File	Complaint
Relationship	
STR CD	
Violation Updated Date	
Processes	
Assign Investigation (Completed on Apr 29, 2021 09:16:11 by Ruby Parcon with outcome "Assigned")	
Perform Investigation (Completed on May 28, 2021 16:09:06 by Charlene Cranton, Property Use Inspector with outcome "Follow-up Investigation Scheduled")	

Comments
Description
Findings

May 28th, 2021 - spoke with complainant and s.22(1) advised the noise has been quiet but the restaurant has been closed, s.22(1) will keep me posted on the noise as the restaurant is now re-opening.
s.22(1) will reach out to me via email with an update next week.
Jun 4, 2021 00:00:00

Re-investigation Date
Route Order

Assignments

Charlene Cranton, Property Use Inspector
Perform Investigation (Completed on Jun 28, 2021 13:14:33 by Charlene Cranton, Property Use Inspector with outcome "No Violation Found")

Additional Instructions

Comments
Description
Findings

As per our conversation on May 28th, 2021, complainant has not contacted me back regarding noise issue.
Closing case noise issued resolved.

Re-investigation Date
Route Order

Assignments

Charlene Cranton, Property Use Inspector

Relationships

Document: 146798368
Enforcement Stream: Property Use
Investigator: Charlene Cranton, Property Use Inspector
Parcel: 015-458-903 - Parcel: 869 HAMILTON STREET, Vancouver, BC V6B 2R7