

## Gas Station or Auto Parking Lot SUPPLEMENTAL INFORMATION

DATE: \_\_\_\_\_

### **PART 1: EXISTING LICENCE INFORMATION - Required - Complete ALL fields**

Business Licence No.:	Business Name on Existing Licence: (If applicable, include Lot #)
Business Address on Existing Licence:	

### **PART 2: AUTO PARKING WITH EV CHARGING LOCATION INFORMATION - Provide NEW information ONLY**

NEW Business Name: (Sole Proprietor, Partnership, or BC Incorporated Company Name)	BC Corporation / Society or Extra Provincial Company / Society Registration No.:
NEW Trade Name/Doing Business As:	
NEW Business Subtype:	
NEW Business Address:	Business Location Type: Vancouver Commercial/Industrial
NEW Mailing Address:	
Business Email Address (required):	Business Phone # (required):
Preference for annual business licence renewal: By Mail                      By E-mail	

### **PART 3: EV CHARGING INFORMATION (required)**

Gas Station	Auto Parking
Alternative off-site address (if applicable):	# of stalls:
# of Level 2 Chargers:	# of Level 2 Chargers:
# of Level 3 Chargers:	# of Level 3 Chargers:
Total kW of charging installed:	Total kW of charging installed:
Electrical Permit #:	Electrical Permit #:

## PART 4: APPLICANT STATEMENT

- Gas Station or Auto Parking with EV Charging, as the business licence holder for this site, I/we:

Certify the final electrical inspection was passed;

Certify the minimum charging specification satisfy the requirements of commercial parking lots and/or gas stations;

Declare the chargers installed have been connected to a central system via internet communication such as open protocol (e.g., OCCP) or a proprietary system;

- The following items are enclosed as part of the Gas Station or Auto parking with EV Charging Verification Package:

Picture of installed charging station(s) - One image per station if multiple stations are part of your application;

Proof of charger internet connectivity is submitted - A screenshot of the back-end network operating system that shows that the charging stations are connected to the network;

Business licence Change of Information form.

- Auto Parking Small, as the business licence holder for this site, I/we:

Certify that the Auto Parking lot contains fewer than 60 stalls.

I/We the undersigned confirm as the business owner(s)/agent for the owner(s) that the above noted information is correct and agree to comply with ALL relevant provisions of the Licence 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. The information provided may be shared in accordance with the Freedom of Information Act.

Print Name

(First)

(Last)

Signature

Owner/Director

Representative/Agent

## COV SUSTAINABILITY REVIEW

Staff Review: \_\_\_\_\_

Date: \_\_\_\_\_

## LICENCE DEPARTMENT USE ONLY

APPROVALS REQUIRED:

ZONING

BUILDING

POLICE

HEALTH

CLASSIFICATION(S): 1. \_\_\_\_\_ Licence Number: \_\_\_\_\_

2. \_\_\_\_\_ Licence Number: \_\_\_\_\_