

Folder No.	Date (yyyy-mm-dd)
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**Project Information**

Street No.	Business Operating Address	Suite/Unit No.
Business Name		Existing Use

**Proposed Use: Amusement Establishment**

A premises that offers or permits any type of amusement activity for patrons, including any establishment that provides space for amusement activities for patrons, but does not include fitness facilities, recreation centres, or community centres.

Do you have a patio on private property?   ☐ Yes   ☐ No

If yes, where is the private patio located on the property (please select all that apply):

☐ Front   ☐ Rear   ☐ Roof   ☐ Side

If you offer amusement, entertainment or live performances please indicate below what you offer:

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Bowling            | <input type="checkbox"/> Video Arcade and Arcade Games | <input type="checkbox"/> Archery        | <input type="checkbox"/> Axe Throwing       |
| <input type="checkbox"/> Carnivals          | <input type="checkbox"/> Roller-Skating Rinks          | <input type="checkbox"/> Miniature Golf | <input type="checkbox"/> Golf Driving Range |
| <input type="checkbox"/> Go-Kart Courses    | <input type="checkbox"/> Rebound Tumbling              | <input type="checkbox"/> Trampolines    | <input type="checkbox"/> Internet Cafes     |
| <input type="checkbox"/> Billiards and Pool | <input type="checkbox"/> Other (Please Specify): _____ |   |   |

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**NOTE:** If you also operate as an [Entertainment Establishment/Nightclub](#), you will also need to apply for a Zoning Compliance Review for an [Entertainment Establishment/Nightclub](#).

**Owner Information**

First Name		Last Name	
Company Name (if applicable)	Company Officer	Position	Telephone No.
Street No.	Street Name		Suite/Unit No.
City/Town		Province	Postal Code
E-mail Address			

Continue on next page

### Applicant Declaration

First Name		Last Name	
Company Name			Telephone No.
Street No.	Street Name		Suite/Unit No.
City/Town	Province	Postal Code	
E-mail Address			
<p><b>do hereby declare the following:</b></p> <p>That I am <input type="checkbox"/> The owner as stated above  <input type="checkbox"/> The owner's authorized agent  <input type="checkbox"/> An officer/employee of _____, which is an authorized agent of the owner  <input type="checkbox"/> Interested party</p> <ul style="list-style-type: none"> <li>that statements contained in this request form are true and made with full knowledge of all relevant matters and of the circumstances connected with this request.</li> <li>that the information included in this request and in the documents filed with this request are correct.</li> <li>that the plans and specifications submitted are prepared for the construction or alteration of the building or buildings described and are submitted in compliance with copyright law.</li> <li>that I understand that this review does not relieve the owner from complying with the <i>Ontario Building Code Act</i>, all applicable by-laws and regulations.</li> </ul>			
<p><b>I hereby certify the at I have read and agree to abide by the conditions above</b></p>			
<div style="border-top: 1px solid black; width: 100%;"></div> Applicant Signature		<div style="border-top: 1px solid black; width: 100%;"></div> Date (yyyy-mm-dd)	

### NOTES

- One additional review may be provided where minor revisions are made to plans to comply with zoning requirements or additional information is provided for a more complete review.
- A new request form must be submitted and full fees paid for new proposals or any additional reviews that may be required.
- If any building alterations are proposed, or if a new major occupancy is being introduced into the building, a building permit may be required. For further information please contact the Building Division.

Please complete the form and **email** to [bldapplications@toronto.ca](mailto:bldapplications@toronto.ca)

The personal information on this form is collected under the City of Toronto Act, S. O. 2006, Chapter 11, Schedule A, s. 136 (b) & (c) and the Ontario Building Code Act, S.O. 1992, Chapter 23. The information collected will be used for processing applications and creating aggregate statistical reports. Questions about this collection may be referred to the Customer Service Manager in the appropriate district. Toronto East York District, 100 Queen Street West, Ground Floor, West Tower, Toronto M5H 2N2; North York District, 5100 Yonge Street, 1<sup>st</sup> Floor, Toronto M2N 5W4; Etobicoke York District, 2 Civic Centre Court, 1<sup>st</sup> Floor, Toronto M9C 2Y2; Scarborough District, 150 Borough Drive, 3<sup>rd</sup> Floor, Toronto M1P 4N7 by calling (416) 397-5330.