



URBAN PLANNING AND ENVIRONMENT  
MUNICIPALITÉ DE MORIN-HEIGHTS  
567, CHEMIN DU VILLAGE  
MORIN-HEIGHTS (QUÉBEC) J0R 1H0  
PHONE : 450 226-3232, POSTE 115  
EMAIL : [service.urbanisme@morinheights.com](mailto:service.urbanisme@morinheights.com)

## APPLICATION FORM FOR AN AUTHORIZATION CERTIFICATE

F-Urb-16

### ADDITIONAL USE

<b>LOCATION WHERE THE ADDITION USE WILL BE CARRIED OUT</b>	
Address	Lot N°
<b>USE OF MAIN BUILDING</b>	
<input type="checkbox"/> Single family residence <input type="checkbox"/> Two-family residence <input type="checkbox"/> Retail business <input type="checkbox"/> Convenience store <input type="checkbox"/> Other business (specify) : _____	<input type="checkbox"/> Other business : _____ <input type="checkbox"/> Industrial group use : _____ <input type="checkbox"/> Public group use : _____ <input type="checkbox"/> Agricultural group use : _____
<input type="checkbox"/> The additional use will be carried out in a building: : <input type="checkbox"/> Existing, with no renovation or alteration work; <input type="checkbox"/> Existing, with renovation or alteration work (Please complete the required form) <input type="checkbox"/> Planned/New construction (Please complete required form)	<input type="checkbox"/> The additional use does not require a building
Is there already an additional use at this location? <input type="checkbox"/> Yes, specify : _____ <input type="checkbox"/> No	
Will a sign be installed? <input type="checkbox"/> Yes (Please complete required form) <input type="checkbox"/> No	
<b>APPLICANT IDENTIFICATION AND MAILING ADDRESS</b>	
Applicant's first and last name	
Postal address	Postal address
City	
Cell N°	Cell N°
Email	
The applicant is the owner* : <input type="checkbox"/> YES <input type="checkbox"/> NO *If no: please complete the AUTHORIZATION section.	
<b>ADDITIONAL USE : A USE THAT IS SUBORDINATE TO AND DIFFERENT FROM THE MAIN USE, BUT NOT AN ACCESSORY USE. FOR EXAMPLE, IT COULD BE A BUSINESS OFFICE IN A HOME OR A RETAIL SPACE IN A FACTORY.</b>	
<b>ADDITIONAL USES TO MAIN USE IN THE RESIDENTIAL GROUP</b>	
<input type="checkbox"/> Intergenerational dwelling <input type="checkbox"/> Additional dwelling <input type="checkbox"/> Guest house <input type="checkbox"/> Room rentals <input type="checkbox"/> Home-based personal and professional services :	<input type="checkbox"/> Hobby farm <input type="checkbox"/> Tourist accommodation of the principal residence type 1 (Complete the operator's attestation) <input type="checkbox"/> Home-based childcare service

<input type="checkbox"/> Home-based artistic and artisanal activities :	<input type="checkbox"/> Intermediate and Family-Type Resources (as defined in the Act respecting health services and social services, CQLR c. S-4.2)
	<input type="checkbox"/> Other : _____

#### ADDITIONAL USES TO MAIN USES IN THE COMMERCIAL, INDUSTRIAL OR PUBLIC GROUPS

<input type="checkbox"/> ATM's	<input type="checkbox"/> Health centres and spas in tourist accommodations:
<input type="checkbox"/> Mail related services :	<input type="checkbox"/> Dairy bars in convenience stores
<input type="checkbox"/> Food preparation services, florists, shoemakers, etc. in grocery stores	<input type="checkbox"/> Child care services
<input type="checkbox"/> Pet food sales in veterinary clinics	<input type="checkbox"/> Intermediate and Family-Type Resources (as defined in the Act respecting health services and social services, CQLR c. S-4.2)
<input type="checkbox"/> Food services in tourist accommodations (hotels, campgrounds);	<input type="checkbox"/> Other : _____
<input type="checkbox"/> Rental services for sports and recreational equipment in accommodations;	

#### ADDITIONAL USES TO MAIN USE IN THE AGRICULTURAL GROUP

<input type="checkbox"/> Agricultural product sales	<input type="checkbox"/> Farm tours
<input type="checkbox"/> Storage, packaging, or processing of agricultural products	<input type="checkbox"/> Farm stays
<input type="checkbox"/> Country-style dining (table champêtre)	<input type="checkbox"/> Rest areas inside a maple sugaring operation

#### COMPANY CONTACT INFORMATION (TO BE COMPLETED IF APPLICABLE)

Company name			
Company phone N°			
Opening hours			
Number of employees			
Outdoor display or storage required	<input type="checkbox"/> Yes (see below)	<input type="checkbox"/> No	
	<input type="checkbox"/> Front yard	<input type="checkbox"/> Back yard	<input type="checkbox"/> Side yard
Buisness name (NEQ)			
Start date of occupancy (DD/MM/YYYY)			

Additional details useful for understanding the project:

---



---



---

Work start date (DD/MM/YYYY)	Work end date (DD/MM/YYYY)	Estimated cost
------------------------------	----------------------------	----------------

#### REQUIRED DOCUMENTS **The application and all required documents must be submitted as one (1) printed copy to scale and one digital copy (PDF format)**

- An interior layout plan of the premises** showing the following elements:
  - a. Divisions and uses of interior spaces
  - b. Identification of exits ;

**Attention!** For any change of use or development of new premises, a certificate of compliance by a technologist or architect may be required.
- An exterior layout and parking plan** showing the following elements
  - a. Number of parking spaces;
  - b. Green space and required number of trees;
  - c. Loading and delivery area;
  - d. Outdoor storage or display area;
- A photo montage** of the existing premises or the location where the additional use will be carried out.

**COÛT DU CERTIFICAT**

Additional use to a principal use in the Residential group	100 \$
Additional or intergenerational dwelling unit	100 \$ / logement
Additional use to a principal use in the Residential group (tourist accommodation of the principal residence type)	250 \$
Additional use to a principal use in the Commercial, Industrial, or Public group	200 \$

**IMPORTANT**

The inspector assigned to the file reserves the right to require any additional documents, estimates, reports, or plans necessary to ensure the compliance of the application

**APPLICANTS SIGNATURE**

The undersigned declares that the information provided above is accurate and acknowledges having read the applicable municipal regulations.

**The undersigned understands that it is mandatory to obtain a permit or authorization certificate before starting any work or use**, and that this form does not, at any time, constitute approval or authorization.

<b>Applicant's signature</b>	<b>Date</b> (DD/MM/YYYY)
------------------------------	--------------------------

**OWNERS AUTHORIZATION**

MANDATORY when the applicant is different from the owner or when the owner is a legal entity (e.g., a company).

Owners phone number : \_\_\_\_\_  
I \_\_\_\_\_, owner, authorize \_\_\_\_\_ to  
(Owners name in block letters) (Applicants name in block letters)

Submit and sign on my behalf this application for an authorization certificate for my property located at  
\_\_\_\_\_  
(Project address or lot number)

Signed on: \_\_\_\_\_ Signature : \_\_\_\_\_  
(Date) (Owners signature)