

APPLICATION FOR LANDLORD'S CONSENT (LC)



As outlined in CMHC Tenant Lease Agreements, some proposals or items require approval from the Landlord. This form is a tool that allows CMHC to review planned work or changes and discuss any considerations with the Tenant prior to consent being granted. If you require assistance in completing the form, please reach out to the Tenant Coordinators at coordinators@granvilleisland.com or (604) 666-6477.

- THIS APPLICATION IS:**
- To make improvements to leased premises (*signage, renovations, etc.*)
 - To make changes to permitted use (*menu changes, hours of operation, temporary closure*)
 - To access buildings outside of normal operating hours
 - Other* (*e.g. use of space outside of Lease Premises, including common areas*)

Please complete and email to the Tenant Coordinators at coordinators@granvilleisland.com

***NOTE:** To make use of public areas for **special events**, please complete the **GRANVILLE ISLAND EVENT FORM**

COMPANY NAME:

CONTACT NAME: *(Person must be listed on the Lease)*

SECOND CONTACT: *(If not Lease Holder)*

PHONE:

DATE:

EMAIL ADDRESS:

DETAILS OF PROPOSAL: *(Before submitting your request, please make sure you have included a summary of the proposed work and necessary supporting material for CMHC's review (e.g. for signage, refer to the Granville Island Signage Guidelines and include drawings, mockup, colour, size, how signage will be attached to the premises, etc.)*

If Approved, Tenant to complete within a defined timeline of 60 days, pending any permit approvals and contractor availability.
If Approved with Conditions, Tenant will sign below to indicate that they agree to respect and work within said conditions. The signed consent form must be returned to CMHC prior to any work done.

Tenant Signature:

IMPORTANT NOTE: The turnaround time for your application is dependent on the scope of your request. If there is an urgency, please contact the Tenant Coordinators at (604) 666-6477.

CONTRACTOR INFORMATION & CITY OF VANCOUVER PERMITS

Will your proposal require the use of contractors and/or permits? If so, please complete the below section:

CONTRACTORS: *(check all that apply)*

Architect

Gen. Contractor

Plumber

Electrician

Engineer

Roofer*

Signage

Other

COMPANY NAME:

** Roofers must be RCABC certified and carry a 5-year RCABC warranty. A comprehensive scope of work must be provided for CMHC's review as a condition of approval. Contact the Tenant Coordinators for roof access if required.*

Are you installing a new fixture or piece of equipment? YES NO

If yes, please include or attach the details including make, model, and specification sheet if available.

TENANT RESPONSIBILITY:

Tenants are responsible for all costs and expenses relating to any repairs, replacements, installations, improvements, or other work of a similar nature for which CMHC's consent is requested under this LC, as applicable, including but not limited to any damage to property which may result therefrom. Tenants are responsible for the maintenance of such work and agree to allow CMHC to inspect such work upon reasonable notice during the term of the Lease.

There shall be no filming activities in the Tenant's Licensed Area without prior written Landlord consent, said consent shall be at the sole and unfettered discretion of the Landlord.

Tenants are responsible for determining if their planned work requires City of Vancouver permits. If required, your contractor will need to obtain a letter of authorization from CMHC before submitting to CoV. Please indicate below if you require CMHC to arrange for a letter, which will be delivered upon approval of your LC.

CITY OF VANCOUVER PERMITS:

YES, I WILL REQUIRE AN OWNERS AND TENANTS UNDERTAKING LETTER FOR PERMIT APPLICATION

NO, I HAVE CONFIRMED THIS WORK DOES NOT REQUIRE A PERMIT

FOR CMHC USE ONLY

LC Date **Received**: _____

LC Date **Returned**: _____

Property Manager - Christine Turner

RECOMMEND:

- Approved
- Approved with Conditions
- Denied

INITIAL:

Comments/Conditions: _____

DATE: _____

Manager - _____

RECOMMEND:

- Approved
- Approved With Conditions
- Denied

INITIAL:

Comments/Conditions: _____

DATE: _____

- CC: Security
 Information

- Public Affairs Manager
 Programming & Events

- Leasing Manager
 Sr Lease Administrator
 Property Manager

- Operations Manager
 Operations Coordinator
 Maintenance Dept.
 Janitorial Dept.