F 250.746.6129



#### **TEMPORARY USE PERMIT**

Permit No: TUP-2021-01

**Registered Owner:** Provincial Rental Housing Corporation (BC Housing)

Subject Property: 610 Trunk Road, Duncan BC

**Description of Land:** 

Parcel Identifier: 018-828-515

Legal Description: Lot A, Section 16, Range 7, Quamichan District, Plan VIP58624

**Proposal:** Temporary Use Permit - Temporary Accommodation for a 24-hour shelter with support services

for up to 40 individuals in 40 temporary modular shelter cabins

#### **Conditions of Permit:**

1. This permit is issued subject to compliance with all relevant City of Duncan bylaws, except as specifically varied or supplemented by this Permit.

- 2. This permit applies to the lands described above, and any buildings, structures, and other development thereon (hereinafter called 'the Lands').
- 3. The Lands and building which are subject to this Permit shall be developed in accordance with the terms and conditions of this Permit and in accordance with the following schedules:

Schedule A - Site Plan

Schedule B – Temporary Emergency Shelter Layouts

Schedule C – Temporary Use Permit Application Package

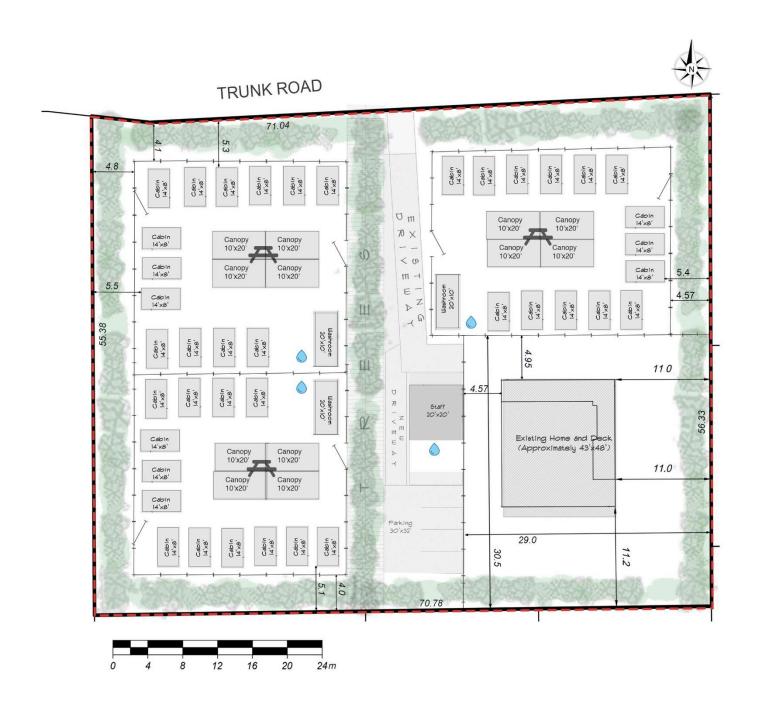
- 4. The following specific conditions must be met:
  - a. That the operator (Lookout Housing and Health Society) adheres to the project program outlined in Schedule C of this permit with regards to procedures, on- and off-site support, staffing and security plans, and commitment to the neighbouring community.
  - b. No visitors outside of support, or related services shall be permitted on site.
  - c. Outdoor activity and intake areas shall be landscaped and/or screened from public view and from the view of adjacent properties.
  - d. Adequate lighting shall be provided in all areas where people will be on site and shall be shielded and reflected away from adjacent uses.
  - e. Adequate management, support staff, and security must be present during the hours of operation of the facility. A minimum of one (1) security guard must be present on the site when the site is not otherwise staffed.
  - f. A security plan shall be submitted to the RCMP for review and comment.
  - g. Cowichan Housing Association, or partner, must establish a Community Advisory Committee and meet a minimum of once per month. Representation should include local business owners, neighbouring residents, representatives from Island Health, the City of Duncan, and Local RCMP among others.
  - h. All structures must be in compliance with any life safety recommendations by the City's Fire Inspector.

- 5. This permit authorizes the temporary use, beginning on January 15, 2022, and expiring on September 30, 2022, at which time the rights granted under this permit will cease.
- 6. This permit may be extended one time, by application to Council, for a period not more than the previously issued permit, as per the regulations set out in section 497(2) of the *Local Government Act* and section 6.4 of *Official Community Plan Bylaw No. 2030, 2007.*
- 7. This permit is not a building permit.
- 8. City Council has the right to terminate this permit with any breach of the above-mentioned conditions.
- 9. This Temporary Use Permit is granted to Cowichan Housing Association, with Lookout Housing and Health Society to serve as the primary contact and agent for operating the temporary shelter and support services. No other agent will be permitted to operate the shelter, unless approved by City Council.

Au	th	nri	70	Ы	hν

Monika Schittek, Corporate Officer	Michelle Staples, Mayor
I HEREBY CERTIFY that I have read the terms and condition	ons of the Temporary Use Permit contained herein. I understand and
agree that the City of Duncan has made no representation	ons, covenants, warranties, guarantees, promises, or agreements (verbal
or otherwise) with Cowichan Housing Association/Looko	out Housing and Health Society, other than those contained in this Permit,
other than those detailed in the Licence to Occupy Agree	ement between the City of Duncan and BC Housing, and the sublicence
between the City of Duncan and Cowichan Housing Asso	ciation and Lookout Housing and Health Society.
Owner/Agent (signature)	Witness (signature)
Print Name	Print Name
Date	Date

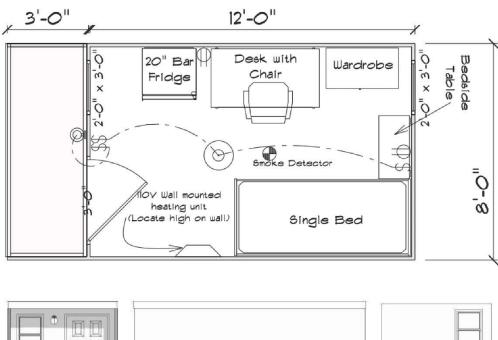
Schedule A - Site Plan



### Schedule B – Cabin Layouts



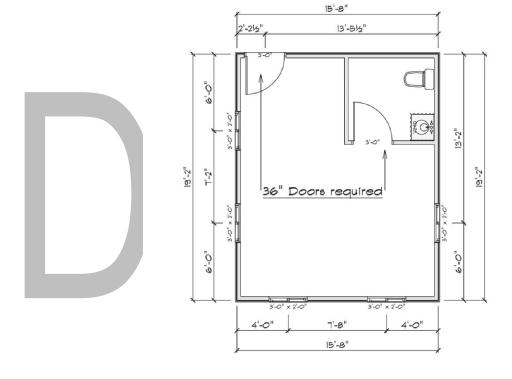
## **Approved Design Drawing - Emergency Pods**







# **Approved Design Drawing - Staff Pod**





## **Approved Design Drawing - Washroom/Shower Pod**

