



**TOWN OF CRESTON**  
 PO Box 1339, 238-10<sup>th</sup> Avenue North, Creston, BC V0B 1G0



Phone: 250-428-2214 \* Fax: 250-428-9164  
 email: info@creston.ca

**SECONDARY SUITE WAIVER**

Owners of Property with Secondary Suites

If your property contains a secondary suite that is **NOT currently used as a separate residence and is not intended to be used as a separate residence for the current year**, you must sign the below waiver in order to only be charged the single family dwelling rate. This waiver must be signed every year as long as the suite is not being used as a separate residence. An inspection may be required to confirm the suite is not being used as a separate residence.

**SECONDARY SUITE WAIVER**

(This form is to be completed if you have a secondary suite on your property that is **NOT** presently being used as a separate residence within the current year).

I (we), the owner(s) of the residence indicated below, hereby declare that for the current year, the secondary suite is NOT being used as a separate residence, and that NO part of this building is being used as a separate residence by any other person(s) and that the entire building is being used as a single detached residence. This form must be signed and returned to the Town of Creston prior to January 31<sup>st</sup> for a secondary suite refund or adjustment.

In the event that I (we) do begin to use the secondary suite as a separate residence, or permit any part of this building to be used as a separate residence, we agree to provide prior notification to the Town of Creston and understand that additional water/sewer charges will begin to apply to the property.

I (we) also understand that an inspection by staff from the Town of Creston, of that part of the building that is being used as a separate residence, may be necessary to assess the validity of this invoice.

I (we) also understand that failure to notify the Town when a secondary suite starts to be used as a separate residence, could result in additional penalties being assessed against us as owners of the property.

PHONE NUMBER	NAME OF OWNER (S)
VACANCY START DATE	ADDRESS OF RESIDENCE
DATE SIGNED	SIGN HERE - OWNER