SHORT TERM RENTAL APPLICATION

Application packet must be completed in full including fees before being submitted.

- 1. Once the application is received and determined to be completed, and all fees are paid in full, the Code Enforcement Officer/Building Inspector, will review all submitted materials for compliance. Please note that additional information may be requested.
- 2. Once the application is approved you will be notified by the Town of Hunter Building Department to schedule the required Fire Safety Inspection.

3. SHORT-TERM RENTAL APPROVAL is ONLY GOOD FOR 1 YEAR.

- 4. Make sure that you have read and reviewed The Town of Hunter Short Term Rental Law
- 5. Supply an accurate, suitable floor plan for each level of short-term rental as stated in section 4, #6 A-E in the short-term rental law for the Town of Hunter. Make sure all is legible, can be hand drawn on 8.5 x 11 Standard paper.
- 6. Provide parking lot drawings details and ariel picture of where cars will be parked, and number of cars allowed.
- 7. Have copies of current insurance policy attached.
- 8. Have emergency contact paperwork filled out and attached with application.
- **9.** If you have a building with 5+ Bedrooms or more, you will be required to schedule and submit a site plan review.

SHORT TERM RENTAL APPLICATION

Date:	Parcel ID / Tax Map #:
OWNER INFORMATION	
Name of Property Owner (no	LLC's):
Phone Number:	
Email Address:	
SHORT TERM RENTAL PROP	PERTY INFORMATION (STR)
Physical Address:	
# Of Bedrooms:	
# Of Bathrooms:	-
Which platforms is this prope	erty listed for rent on?
How Are You Renting the Pro	operty (Please Mark One):
Single Family Residence (ent	ire home rented)
Single Family Residence with	n Rented Room Only
Multi Family Residence (rente	ed as separate units)
Attached/Detached Area Only	/
# of Parking spaces available	e for guests
Do you rent this property for	less than 30 days? Yes No
Maximum nights that can be	rented at one time
Minimum nights that can be r	rented at one time
Is the Property on Well/Septic o	r Municipal Water/Sewer (circle one) WELL/SEPTIC WATER/SEWER
Floor Plan attached?: Yes or No	Parking Plan attached?: yes or no Pictures supplied?: yes or no

Does property have a pool/spa (please mark all that pertain):				
Above Ground	Inground	Hot Tub	Sauna	

EMERGENCY CONTACT INFORMATION

Name: _____

Address:

Phone Number: _____

The name, address, telephone number and email address of a contact person, who shall be responsible and authorized to act on the owners' behalf to promptly remedy any violation of the standards outlined in this section. The contact person may be an owner, or an agent designated by the owner(s) to serve as a contact person and shall respond to any correspondence or concern from the Town of Hunter or any of its designees within two hours and must be available 24 hours per day, 7 days per week.

• Please be aware that if you change the emergency contact person for the property you are to notify our department within 5 business days of change.

Copy of valid Insurance provided?: yes or no

Does the property have one of the following heat sources: (circle all that apply) Woodstove, propane stove, pellet stove, gas stove, kerosene stove, coal stove

Where is emergency information located: _____

To the best of my ability, I have filled this form out and provided all items and information that are required by The Town of Hunter in regard to Local Law #2 of 2023 for short term rentals.

Print name here

Signature of owner

BELOW THIS LINE IS FOR OFFICE USE ONLY

Date Received: Application #: Fee Paid: \$ Receipt#: STR Permit #: INSPECTOR: Approval Date: DENIED: Yes or No (reason attached)

SHORT TERM RENTAL OWNER AGREEMENT

Please initial the items below

- 1. I have received a copy of The Town of Hunter Short Term Rental Law and understand its requirements.
- 2. I agree to the best of my efforts to not let this Short-Term Rental adversely affect the neighborhood in which it is located. _____
- 3. I understand that The Town of Hunter has the authority to obtain additional information from the applicant as necessary.
- 4. I agree to notify the Town of Hunter within 5 business days if the emergency contact changes.
- 5. I understand that false statements or information provided are grounds for automatic denial or revocation of Short-Term Rental Permit.
- 6. I understand that this Short-Term Rental must be properly maintained and regularly inspected to ensure continued compliance with health, safety and fire codes, provisions and fees required annually
- 7. I understand that all fees must be paid in full before receiving active permit _____
- 8. I understand that the Short Term Rental Permit is valid for 1 calendar year and I am required to renew within 3 months before expiration date in order to keep operating as a short term rental property.
- 9. I understand that I must provide a bear proof Dumpster/Garbage can and abide by the Garbage and refuse requirement located in STR Local Law # _____
- 10. If your permit expires, and you did not renew in time, you must re apply in full.

SHORT TERM RENTAL CHECKLIST

-	Street address visible from outside the residence
-	All decks and stairs have guards and graspable handrails
-	Emergency egress routes are compliant and unobstructed
-	Extinguishers are in place and up to date
-	Basement bedrooms have proper escape windows in event of fire
-	Smoke and CO2 Detectors are in their proper locations
-	Stairs are free of trip hazards
-	Guests have access to electrical panel box
-	No extension cords being used in residence
-	# of Parking Spaces available
-	No exposed wiring
-	Max # of persons allowed
-	Heating systems maintained and operational
-	Building permits taken out and approved for any new work
-	Dumpsters are properly latched, and bear proofed
-	Display Emergency Contact/ Permit/ Parking Map visibly in common area

SHORT TERM RENTAL EMERGENCY CONTACT INFORMATION

I,______, am aware that I am the local, 24hr, emergency contact for the property located at _______. I understand that I am to respond within 1 hour in case of an emergency or needed inspection by the Town of Hunter Building Department. I also acknowledge that my contact information will be publicly available. I also acknowledge that if I am no longer the property manager for the above referenced location, I am to notify the Building Department with in 5 business days to let them know.

Signature of Emergency Contact

Date of Signature

Contact #

Contact Email