

APPLICATION FOR SHORT-TERM RENTAL

1 PROPERTY

Address to be Developed: _____

Legal Description:

Lot _____ Block _____ Plan _____ or,
Quarter _____ Section _____ Twp. _____ Range _____
Land Use District _____ Roll # _____

2 TYPE OF DEVELOPMENT AND/OR USE

- Short Term Rental - In Home
- Short Term Rental - Home Lot
- Short Term Rental - Commercial

Please include a description of the dwelling unit proposed for use as a short-term rental (e.g. basement suite, main floor, detached suite, condominium unit, etc.):

3 CONTACT INFORMATION

Applicant:

Mailing Address: _____

Town/City: _____ Province: _____ Postal Code: _____

Phone: _____ Fax: _____

Cell/Alternative: _____ Email: _____

(If Different Than Above)

Landowner:

Mailing Address: _____

Town/City: _____ Province: _____ Postal Code: _____

Phone: _____ Fax: _____

Cell/Alternative: _____ Email: _____

4 CONSENT TO ELECTRONIC NOTIFICATION:

I consent to receive documents from the Planning Department by electronic means and have provided the following email address to be used by the Town for that purpose.

Email address to be used: _____

5 RIGHT OF ENTRY

I DO I DO NOT

GIVE CONSENT FOR AN AUTHORIZED PERSON(S) OF THE TOWN OF SLAVE LAKE TO ENTER UPON THE LAND

- **PRE-DEVELOPMENT INSPECTION(S)** EVALUATE THE SITE WITH THE PROPOSED DEVELOPMENT
- **LOT GRADING INSPECTION(S)** EVALUATE THE LOT GRADING ON SITE
- **FINAL DEVELOPMENT COMPLETION INSPECTION(S)** CONFIRM ALL CONDITIONS OF THE DEVELOPMENT PERMIT HAVE BEEN MET.

All inspections will be conducted during regular business hours i.e., Monday to Friday from 8:00 am to 4:30 pm. You are not required to be present during these inspections; however, you may be present if you choose. The Planning Department will not be entering into any structures at any time and will not be conducting inspections for any other reason(s) than those specified above. However, if this application is for an Apartment, a Secondary Suite, a Security Suite, or a Bunkhouse the Planning Department will conduct an inspection of the interior of these developments.

The personal information is being collected under the authority of the Municipal Government Act M-26 and will be used for administering the affairs of the Town of Slave Lake and provision of services. It is protected by the privacy provisions of the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection, contact the Town of Slave Lake FOIP Coordinator.

- I hereby acknowledge and understand that a Development Permit comes into effect 21 days after the date of decision of the Development Authority.
- The Land Use Bylaw provides that any person claiming to be affected by a decision of the Development Authority may appeal to the Subdivision and Development Appeal Board within 21 days of the date of decision.
- I hereby agree that, should I not appeal the conditions of the approval of the DEVELOPMENT AUTHORITY within 21 days from the date of the decision, I will undertake to perform, fulfill and abide by all conditions of the Development Permit.
- I understand that I may be required to obtain permits pursuant to the Alberta Safety Codes Act.

Land Owner's Name (please print)

Land Owner's Signature

Date

Applicant's Name (please print)

Applicant's Signature

Date

6 FEES, DEPOSITS, ETC. (OFFICE SECTION ONLY)

Application Fee	\$ _____	Development Permit # _____
Development Deposit	\$ _____	
Others (_____)	\$ _____	Application Date: _____
Total	\$ _____	

SHORT-TERM RENTAL APPLICATION CHECKLIST

1 GENERAL CHECKLIST

- Filled Out Application Form
- Guest Safety Attestation (required to all)
- Fire Safety Plan (required to all)
- Parking Plan (required to all)
- Primary Residence Attestation (for In Home or Home Lot applications)
- Owner/Landlord Consent Form (if applicable)
- Condominium Board Consent Form (if applicable)

TYPE OF SHORT-TERM RENTAL TYPES AND DEFINITIONS

Short Term Rental - In Home: means the use, by an individual or a member of their household, of their Primary Residence or portion thereof, for the provision of up to four Accommodation Units for guests who each stay up to 90 consecutive days. The number of approved Accommodation Units will depend on the availability of on-site parking. **Development Permit Application and \$150.00 fee required.**

Short Term Rental - Home Lot: means the use, by an individual or a member of their household, of a Dwelling Unit or portion thereof that is not their Primary Residence but is on the same lot as their Primary Residence, for the provision of up to four Accommodation Units for guests who each stay up to 90 consecutive days. The number of approved Accommodation Units will depend on the availability of on-site parking.

Development Permit Application and \$150.00 fee required.

Short Term Rental - Commercial: means the Use of a Dwelling Unit or portion thereof that is not on the same lot as the business licence holder's Primary Residence, for the provision of up to four Accommodation Units for guests who each stay up to 90 consecutive days. The number of approved Accommodation Units will depend on the availability of on-site parking. **Development Permit Application and \$150.00 fee required.**



Short-Term Rental

Guest Safety Attestation

The purpose of this form is to set out ongoing safety requirements for operating a Short-Term Rental, and to record your agreement to comply with these requirements, for the Short-Term Rental unit at the following address:

Street Address: _____

Postal Code: _____ Unit Number or Description* : _____
*e.g. "basement suite"

Please initial beside each of the following safety measures to attest to your compliance.

1. Smoke Alarms tested and logged monthly _____ (initial)
2. Smoke Alarms are less than 10 years old _____
3. Carbon Monoxide alarms tested and logged monthly _____
4. Fire Extinguisher mounted and serviced annually _____
5. Fire Safety Plan and Instructions to occupants posted at exits _____
6. Emergency contact information posted _____
7. Exits operable and unobstructed (bedroom doors & windows) _____
8. Chimney cleaned annually (if applicable) _____
9. Electrical installations maintained so as not to constitute a fire hazard _____
10. Barbeque clearance from combustibles minimum of 1 meter _____
11. First Aid Kit (level 1) provided conspicuously in unit _____
12. Internal and external passageways unobstructed _____

Note: The Town of Slave Lake may conduct random inspections annually for safety compliance.

I hereby attest that the above have been tested, inspected and maintained as required by the Town of Slave Lake.

Applicant Name (please print)

Signature

Date

How to make a Home Fire Escape Plan

 FIRE PREVENTION WEEK™

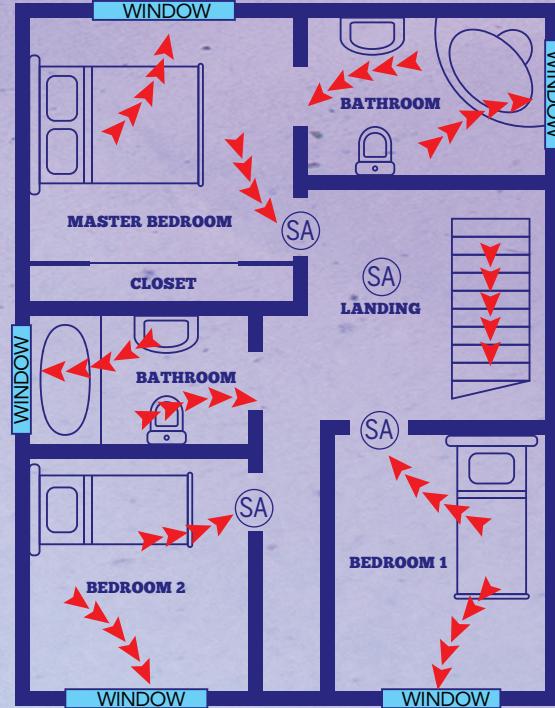
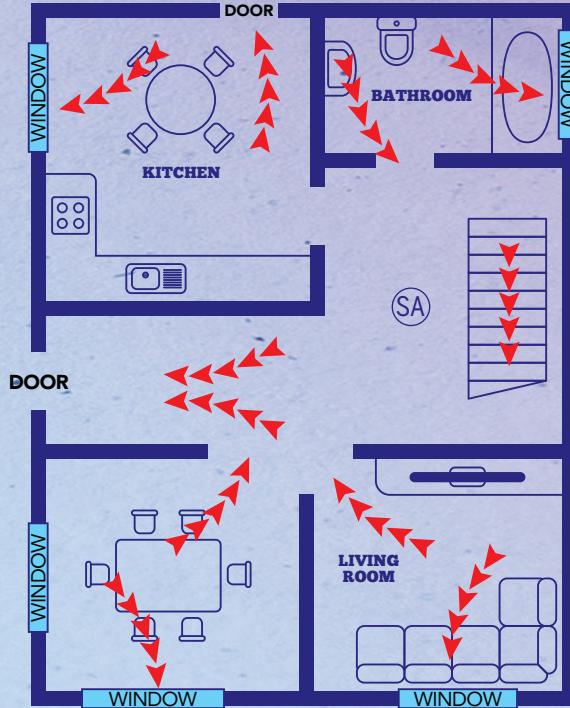
NFPA® — The Official Sponsor of Fire Prevention Week Since 1922



Visit Sparky.org
for more activities!

- Draw a map of your home. Show all doors and windows.
- Visit each room. Find two ways out.
- All windows and doors should open easily. You should be able to use them to get outside.
- Make sure your home has smoke alarms. Push the test button to make sure each alarm is working.
- Pick a meeting place outside. It should be in front of your home. Everyone will meet at the meeting place.
- Make sure your house or building number can be seen from the street.
- Talk about your plan with everyone in your home.
- Learn the emergency phone number for your fire department.
- Practice your home fire drill!
- Make your own home fire escape plan using the grid provided on page 2.

Sample Escape Plan



Kids

1st FLOOR

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2nd FLOOR

Memorize your fire department's emergency phone number and write it here:

How to make a **Home Fire Escape Plan**



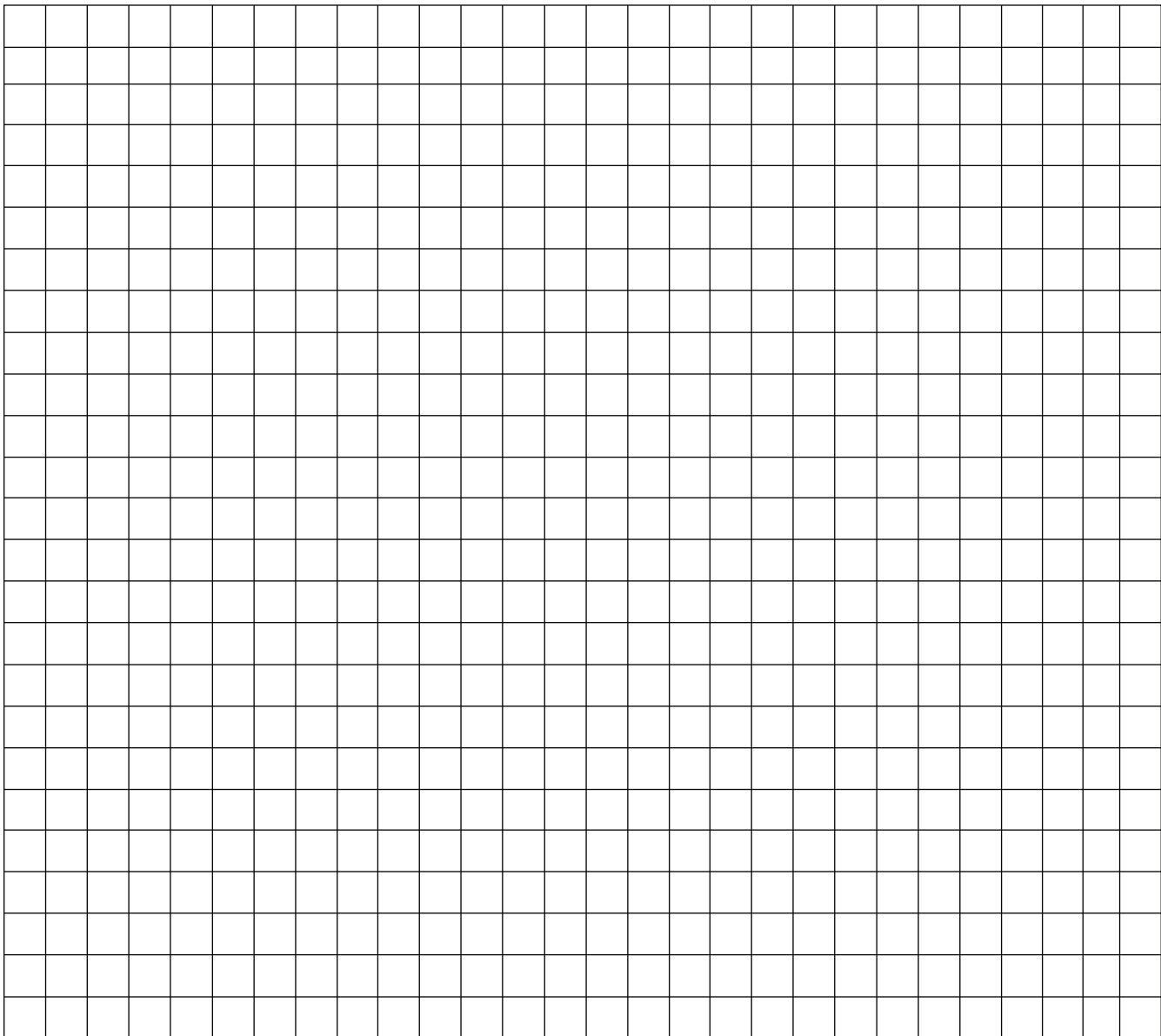
FIRE PREVENTION WEEK™

NFPA® – The Official Sponsor of Fire Prevention Week Since 1922

Visit **Sparky.org**
for more activities!

- Draw a floor plan or a map of your home. Show all **doors** and **windows**.
- Mark **two ways out** of each room.
- Mark all of the **smoke alarms** with **(SA)**. Smoke alarms should be in each sleeping room, outside each sleeping area, and on every level of the home.
- Pick a family **meeting place** outside where everyone can meet.
- Remember, **practice** your plan at least **twice a year**!

-Mark fire extinguishers with FE



Grown-ups: Children don't always wake up when the smoke alarm sounds. Know what your child will do before a fire occurs. Get more information on smoke alarms and escape planning at nfp.org/factsheets.

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Short-Term Rental Parking Plan

The purpose of this form is to make sure you are aware of the parking requirements associated with operating a short-term rental, and to help you create the necessary Parking Plan to meet those requirements. You can then use your plan to show guests where to park their vehicle(s) while staying in your unit.

Short-Term Rental Location

Street Address: _____

Postal Code: _____ Unit Number or Description : _____
(e.g. "basement suite")

REQUIREMENTS

- Your Parking Plan must include 1 on-site (off-street) parking stall for each Accommodation Unit (individually bookable unit, including entire dwellings, a bedroom, or a bed with a shared room), up to a maximum of 4 spaces, plus 1 on-site (off-street) parking stall for the residence – for an In-Home or Home Lot Short-Term Rental.
- You can utilize tandem parking (two vehicles parked front to back on the same driveway).
- The Parking Plan can be a simple sketch, or a more polished diagram. It's up to you. Be sure to distinguish between spaces for your own vehicle(s) and spaces for guests.

I understand that I am required to conspicuously display a copy of the Parking Plan illustrated on the following page (or attached) in the dwelling unit or portion thereof being used as a short-term rental, and that I am required to ensure the indicated off-street parking spaces are made available to guests during all guest stays. I agree to notify the Town if there are any changes to this Parking Plan.

Applicant Name (please print)

Signature

Date

PARKING PLAN



Short-Term Rental Primary Residence Attestation

The purpose of this form is to confirm that the Dwelling Unit at the following address, for which you are seeking a Short-Term Rental Development Permit (In-Home Short-Term Rental or Home-Lot Short-Term Rental), is in fact your **Primary Residence** (the Dwelling Unit you live in for a longer period during a calendar year than any other place).

Street Address: _____

Postal Code: _____ Unit Number or Description* : _____
(*e.g. "basement suite")

Please provide a copy of government-issued photo identification that places you at the above address. This can include:

- Driver's Licence
- Passport or NEXUS Card
- Permanent Resident Card
- Alberta ID Card
- Status Card

I hereby attest that the Dwelling Unit at the address above is my Primary Residence (the Dwelling Unit I live in for a longer period during a calendar year than any other place).

Applicant Name (please print)

Signature

Date



Short-Term Rental Owner/Landlord Consent Form

The purpose of this form is to ensure you have permission from your landlord to operate a short-term rental at the following address:

Street Address: _____

Postal Code: _____ Unit Number or Description : _____
(e.g. "basement suite")

REGISTERED OWNER DETAILS

Full Name: _____

Mailing Address (Street, City, Province): _____

Postal Code: _____ Email: _____

Phone Number: _____

APPLICANT DETAILS (Tenant Only)

Full Name: _____

Mailing Address: _____

Postal Code: _____ Email: _____

Phone Number: _____

Please be advised that I, a registered owner of the above-mentioned property:

- Have read the Short-Term Rental application prepared by the Applicant, including its attached Parking Plan;
- Consent to the above address being used as a Short-Term Rental as indicated in the Business Licence application and in compliance with Town Bylaws; and
- Agree to immediately notify the Town of Slave Lake, in writing, of any changes regarding this information.

Registered Owner's Name (please print)

Signature

Date



Town of

SLAVE LAKE

Short-Term Rental Condominium Consent Form

The purpose of this form is to ensure you have permission from your Condominium Board to operate a short-term rental at the following address:

Street Address: _____

Postal Code: _____

Unit Number: _____

CONDOMINIUM BOARD DETAILS

Board President or Vice-President Name*: _____

Mailing Address (Street, City, Province): _____

Postal Code: _____ Email: _____

Phone Number: _____

**Cannot be the applicant or a member of the applicant's household. If so, please list another Board member.*

APPLICANT DETAILS

Full Name: _____

Mailing Address (Street, City, Province): _____

Postal Code: _____ Email: _____

Phone Number: _____

Please be advised that I, on behalf of the Condominium Board for the above-mentioned property:

- Have read the Short-Term Rental application prepared by the Applicant;
- Confirm that our Condominium Board has no bylaw prohibiting the above address from operating as a Short-Term Rental and approve the use of any parking spaces indicated in the Applicant's Parking Plan.
- Agree to immediately notify the Town of Slave Lake, in writing, of any changes regarding this information.

Board representative name (please print)

Signature

Date