

CENTRAL KEYSTONE COUNCIL OF GOVERNMENTS

1610 Industrial Boulevard, Suite 400A Lewisburg, PA 17837

Application for SHORT-TERM RENTAL (STR) LICENSE (1 to 29 days)

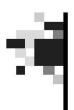
(Note: A separate Application is needed for EACH dwelling unit offered for occupancy.)

Structure Address:	
Owner Name:E-mail:	
Address:City/State/Zip	
Home Phone #:Work Phone #:	
Agent Name: E-mail:	miles from the Municipality)
What kind of License are you applying for (see back of applicatio HOMESTAY(STR1) STR2 STR3 BBH	n for definitions): □BBI
Number of Bedrooms in unit: Parking spaces per unit: Will sleeping accommodations (e.g. fold-out couch, futon) be provided in areas other than the Bedrooms? Yes No If Yes, where? (e.g. living room, porch, etc)	
Has a Zoning Permit been issued for this Dwelling Unit? (attach to Are Smoke Detectors Installed on EACH floor of Dwelling Unit? Are Smoke Detectors Installed in EACH Bedroom and EVERY area sleeping? Are they: Battery Operated Hardwired Interconnel Are Carbon Monoxide detectors (if required) installed on each floor	Yes No a used for Yes No ected
Are Ground Fault Receptacles (GFCI) installed in Kitchen & Bathr	
I, the undersigned, hereby certify that I am the owner of record, or authorized agent for the owner, and agree to conform to all applicable laws of this jurisdiction.	
Applicant Signature:	Date:

Please call the office at 570-522-1323 to schedule an inspection of the unit(s) above. Inspections are performed Monday - Friday, 8:30 am - 2:00 pm. No License will be issued until the unit has been inspected and found to be in full compliance with the Property Maintenance Code.

A SHORT-TERM RENTAL LICENSE indicates that the structure was compliance with the Borough's applicable Codes and Ordinances at the time of issue.

Phone: 570-522-1326 Toll-Free: 1-877-457-9401 Website: www.ckcog.com



CENTRAL KEYSTONE COUNCIL OF GOVERNMENTS

1610 Industrial Boulevard, Suite 400A Lewisburg, PA 17837

(CONTINUED)

SHORT-TERM RENTAL TYPE I - HOMESTAY (STR1) Owner-occupied property offering 1 to 5 bedrooms OR an accessory structure, e.g. garage apartment, guest house, that is let for occupancy on a *transient* basis

SHORT-TERM RENTAL TYPE II (STR2) A Non-Owner-Occupied one or two-Family dwelling that is let for occupancy on a *transient* basis.

SHORT TERM RENTAL TYPE III (STR3) A Non-Owner-Occupied dwelling in a multifamily residential property (*Use Group R-3*) offered for let or occupancy on a *transient* basis.

BED & BREAKFAST - **HOMESTAY (BBH)** Owner-occupied property offering 1 to 5 rooms for occupancy and meeting the definition of a BED & BREAKFAST as defined by the Municipality's Zoning Ordinance.

BED & BREAKFAST - INN (BBI) Owner lives in or *adjacent* to property, offering 6 to 15 rooms for occupancy and meeting the definition of a BED & BREAKFAST as defined by the Municipality's Zoning Ordinance.

Enclose the following items with your application:

- A. Attach a complete floor plan of the property, including room sizes and a site plan showing parking and any fenced areas accessible by occupants. Plans must be of all levels, identify all rooms on all floors, indicate which rooms will have accommodations for sleeping (beds, futons, couches, portable cots, etc.), and indicate locations of all smoke detectors, CO2 detectors and fire extinguishers (if provided). Plans may be hand drawn, providing they are neat, legible and accurate. This will assist the Code Officer in determining the Occupant Load of the unit, so please be as accurate as possible.
- B. A copy of the Zoning Permit for such use, issued by the Zoning Officer of the Municipality.
- C. A copy of the Business License from your Municipality.
- D. Proof of general liability insurance with a minimum amount of three hundred thousand dollars (\$300,000.00) combined single limit and an executed agreement to indemnify, defend, and save the Municipality harmless from any and all claims and liabilities of any kind whatsoever resulting from or arising out of the Licensing of the short-term rental.
- E. A current Inspection Report showing the proposed Short-Term Rental has been inspected by the Code Enforcement Officer or Agency of the Municipality and has been found to be in full compliance with the currently adopted Property Maintenance Code of the Municipality within the previous 15 days. (if not yet inspected, when is inspection scheduled? _____)

Return application and other required documentation to:

Central Keystone COG 1610 Industrial Blvd., Suite 400A Lewisburg, PA 17837 Fax: 570-522-1327

e-mail: rkilps@ckcog.com

Phone: 570-522-1326 Toll-Free: 1-877-457-9401 Website: www.ckcog.com