



Short Term Rental (STR) Self-Compliance Affidavit

I/We, being of lawful age and being first duly sworn under oath, state the following:

STR Property Address: _____ Unit #: _____
Name of Building (if applicable): _____
Owner's Name(s) or Name of Ownership: _____
Total Bedrooms/Sleeping Rooms: _____ Total Occupants Advertised: _____

Initial every clause, acknowledging compliance with these terms.

Life Safety and Town Code Compliance

_____ I have code compliant functioning Emergency Escape and Rescue Openings in all bedrooms/sleeping rooms, and all stairs that access my bedrooms/sleeping rooms have code compliant egress stairways.

_____ Emergency escape and rescue openings, including window wells, allow proper emergency escape and shall be maintained to be free of snow and useable throughout the winter. If a windowsill is less than 24" above the floor and greater than 6' above the exterior surface, window fall protection is provided.

_____ Flights of stairs with four or more risers have a handrail. The open portion of a stair, landing, balcony, deck, or other walking surface that is more than 30" above the floor or grade below has guards (rails).

_____ An opening (door) between the garage and residence shall be equipped with a self-closing device.

_____ My street address sign identification is visible and legible from the roadway year-round for emergency services to locate my property.

_____ Working Smoke Detectors are installed in each sleeping room; centrally located in the hallway giving access to each sleeping area; and on each level of a living area. Smoke detectors are less than 10 years old. All smoke detectors shall be hardwired and interconnected unless a hardwiring system is not already in place.

_____ Working Carbon Monoxide (CO) Detectors are installed if there is a fuel-fired appliance, gas or wood fireplace, or an attached garage. They are installed within 15' outside of each sleeping area; at a minimum of one CO detector per floor; and within any sleeping rooms that have a gas or wood fireplace or fuel-fired appliance. Carbon Monoxide detectors are installed within mechanical rooms that have a fuel fired appliance. CO detectors are less than 10 years old.

_____ A 2.5lb. dry chemical (ABC) Fire Extinguisher is in each kitchen. A minimum of a 2.5lb. dry chemical (ABC) fire extinguisher is also located near the entry door if the kitchen extinguisher is more than 30 ft. from the entry door. If the extinguisher is in a cabinet or not visible, a "Fire Extinguisher" sign is posted. If in a visible location, it is mounted to the wall.

_____ If my Fire Extinguishers' manufacturing date is older than one year, they have current certification tags, or a new one has been purchased. They were purchased/inspected on _____(month) / _____(year).

_____ Wood burning fireplaces, stoves and flues are properly maintained and professionally cleaned and inspected annually. The most recent cleaning/inspection occurred on _____(month) / _____(year). (Annual fireplace inspection report may be requested by Town staff at any point in time to verify safe for use. If you do not have a wood burning fireplace, write N/A).

_____ I do not have an open flame cooking device (i.e. grill) or outdoor gas-fired heating appliance on my combustible (i.e. wood) deck or within 10' of combustible construction (i.e. wood deck/house), OR, I meet one of these exceptions: Single-Family Home or Duplex; the deck is protected with an automatic fire sprinkler system; the residence uses a LP-gas container no greater than nominal one pound capacity.

_____ Electrical Panels in my STR are accessible, are clearly labeled, and maintains 3' of clearance.

_____ Exhaust Systems: Bathrooms equipped with exhaust fans to the outdoors are

operational and functional. Clothes dryers ventilate to the outside, with an exception for ductless clothes dryers.

_____ I understand that additional modifications may be required to allow for safe occupancy at my property i.e., fire extinguishers, street addresses, handrails, or other life/safety equipment.

Licensing Requirements

_____ The use of my STR is in compliance with all the rules and regulations adopted by my HOA.

_____ Parking Plan: I advertise a total number of _____ useable parking spaces located on my property. _____ (#) are covered spaces (i.e., garage/carport), and _____ (#) are uncovered spaces. An HOA approved parking plan is provided confirming the number of available/assigned parking spaces for my property (if applicable). I do not advertise more parking spaces than what the HOA has permitted (if applicable).

_____ I will always have the required and current documents on-site:

- STR license is posted near the front door.
- The following documents are accessible for guests (i.e., welcome binder):
 - Current self-compliance affidavit
 - Good neighbor policy
 - Parking plan
 - Trash information – includes location, disposal instructions, and use of bear proof containers (if applicable)

_____ I will always have the required information on all my online property advertisements. This information is viewable on the listing prior to booking:

- STR license number.
- The number of designated useable parking spaces- this shall be consistent with is declared on this affidavit and what the HOA has approved (if applicable).
- Advertised sleeping capacity – this shall be consistent with what is declared on this affidavit and the occupational fee paid to the Town.
- Reference to Town website for Local Representative contact information.
Sample statement: “For emergency contact/local representative contact information, refer to the Town of Mt. CB website, and navigate to the Short-Term Rental page.”

_____ My Local Representative or property management company is:

_____. If my local representative or property management company changes, I will notify the Town within 10 days and

submit a new local representative form and their driver's license. My Local Representative will be available 24/7 while guests are in-house to address an emergency or guest caused issue.

_____ I understand my STR shall pass an *inspection*. Prior to any change in sleeping areas or occupancy, a new inspection that I schedule is required and additional occupational fee must be paid to the Town. I understand that additional inspections to my STR may be done at random.

_____ My unit is insured for use as a short-term rental property.

_____ I have read the STR Ordinance and STR Guide and understand the rules and regulations, and that my license can be revoked and/or fine may be issued if I do not follow the ordinance.

I SWEAR OR AFFIRM THAT ALL OF THE STATEMENTS MADE ABOVE ARE TRUE TO THE BEST OF MY INFORMATION AND BELIEF

Owner Signature

Printed Name

Date