



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 Pillows (Head Count) Advertised: _____

All statements listed below must be initialed. Failure to initial any statement will delay your license issuance. Please put N/A if an item does not apply to your unit.

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.
- _____ 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).
- _____ 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.
- _____ 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, within 15' outside of each sleeping area, and on each level of a living area. Smoke detectors are less than 10 years old.
- _____ Working Carbon Monoxide (CO) detectors are required if there is a fuel-fired appliance or an attached garage. They are installed, within 15' outside of each sleeping area; at a minimum of 1 CO detector per floor; and within any sleeping rooms that have a fireplace/fuel-fired appliance.



Carbon Monoxide detectors required within mechanical rooms. 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 30ft 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 1 year, they have current certification tags, or a new one has been purchased. They were purchased/inspected on _____ / _____.

_____ Wood burning fireplaces, stoves and flues are properly maintained and professionally cleaned and inspected annually. The most recent cleaning/inspection occurred on _____ / _____. **Annual fireplace inspection report is required** (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: 1. Single-Family Home or Duplex, 2. The deck is protected with an automatic fire sprinkler system, 3. I use a LP-gas container no greater than nominal 1 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. If I am not sure that I comply with safety provisions of this affidavit, I have contacted the Inspector regarding a **waiver**.

Licensing Requirements

_____ I have provided written approval from my HOA for the permitted use of my property as an STR. An HOA approved parking plan is provided stating the number of available/assigned parking spaces and their locations (i.e., marked on map image).

_____ 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. 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:



Mt. Crested Butte, CO

Short-Term Rental Department

- STR license is posted near the front door
- The following documents are accessible for guests (i.e., welcome binder):
 - 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:

- STR license number
- The number of designated useable parking spaces- this shall be consistent with is declared on the affidavit and the HOA has approved (if applicable)
- Advertised sleeping capacity – this shall be consistent with what is declared on this affidavit and the pillow tax 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.

_____ I understand my STR shall pass an **inspection**. Prior to any change in sleeping areas or pillow count, a new inspection that I schedule is required and additional pillow tax 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.

Owner Signature

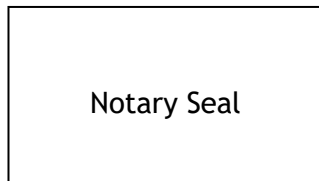
Printed Name

Date

Subscribed and affirmed before me in the county of _____,
State of _____, this _____ day of
_____, 20____.

(Notary’s official signature)

(Commission Expiration)



Notary Seal