



GATEWAY TO THE SAN LUIS VALLEY

719-655-2232

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townclerk@townofsaguache.org

Date: _____ New Application _____ Annual Renewal _____

GENERAL INFORMATION

Name of Property Owner: _____

Mailing Address: _____

City/State/Zip: _____

Street Address of Property: _____

Home Telephone: _____ Cell Phone: _____

Email: _____

Name of Property: _____

Existing Use of Property: _____

Assessor Parcel #: _____

Legal Description: (Please Attach a Location Map that includes a parking plan, and maximum number of occupants, required)

Authorized Representative of Owner: _____

Mailing Address: _____

City/State/Zip: _____

Cell Phone: _____ Office or Alt. Phone: _____

E-mail: _____ Airbnb # _____ VRBO# _____

Signature of Property Owner: _____ Date: _____

Please return completed form and check list with the \$100.00 application fee.

TOWN STAFF USE ONLY

Application received by: _____ on Date: _____

Notice given to property owners within a 400ft of proposed short term rental:

Date: _____ to Date: _____

Safety Inspection Completed – Owner self-certify (Date): _____

Check No. or cash: _____

SHORT TERM RENTAL INSPECTION FORM

A life safety inspection checklist, as supplied by the Town, shall be completed by the owner, at the owner's expense, and provided to the Town prior to approval and prior to issuance of the initial license, and within sixty (60) days prior to each annual renewal. Such inspection shall determine the following:

By initialing next to each line, the owner has conformed compliance with each item listed.

STR Address: _____

STR NOTICE REQUIREMENTS: Below are the required notices/postings that must be in the home:

- _____ Owner's contact information
- _____ Emergency contact information
- _____ Garbage and refuse regulations
- _____ Trash and recycling schedule (if applicable)
- _____ Parking restrictions (if applicable)
- _____ Water restrictions (if applicable)
- _____ Fire restrictions such as active fire bans or restrictions (if applicable)
- _____ Fire evacuation directions in the event of a fire or emergency
- _____ Location of the fire extinguisher, smoke alarms, and carbon monoxide alarms

OPERATIONAL EQUIPMENT REQUIREMENTS:

Outlined below is the equipment that must be provided in each home:

- _____ Adequate Fire extinguisher
- _____ Smoke detector
- _____ Carbon monoxide detector

EXTERIOR SAFETY:

- _____ House number visible from the street.
- _____ All exits unobstructed and clear and maintained that way at all times.

INTERIOR SAFETY:

- _____ All exit doors are free from obstructions.
- _____ Approved covers are in place on all electrical switch and outlet boxes.
- _____ Bathroom and kitchen electrical outlets should be GFI protected.
- _____ All natural-gas appliances have individual gas shut-off valves
- _____ Stairs are free of tripping hazards. Hallways unobstructed and clear and maintained that way at all times.
- _____ Wood burning fire places or stoves are maintained in accordance with recognized standards and include appropriate ash disposal receptacles. Wood burning fire places or stove must have been inspected and cleaned on an annual basis.

I, _____, do attest that I have completed my Short-Term Rental inspection to the best of my ability with honesty and accuracy.

Property Owner Self Certify

Date

