

**TOWN OF GEORGETOWN
SHORT TERM RENTAL PERMIT APPLICATION**

Applicant

Name _____
Mailing / Physical Address _____
Telephone _____
E-mail _____

Short-term Rental Property

Street address _____
Property record title owner _____
Ward I _____ Ward II _____ Ward III _____
Owner Mailing / Physical address _____
Does applicant live at the rental property? Yes _____ No _____
If yes, does applicant live there: Part time _____ Full time _____

Owner Representative

Name _____
Mailing / Physical Address _____
Telephone _____
E-mail _____

Rental Specifics

Maximum occupancy of rental guests _____
Parking Plan - Showing short term rental property and plan for off- street parking.
– One parking space is needed for each bedroom/parking space size is 9' x 20'
Please submit a photo showing the designated parking spaces.

Yes _____ No _____

Attach evidence of property and liability insurance listing the property as a Short Term Rental

Business and Sales Tax Licenses

Business name _____
Business address _____
State sales tax license number _____
County Lodging tax license number _____

Safety Inspection

Attach safety inspection report required by Code Section 5.28.080(d); must be dated within 60 days of application.

Notice of Application

Attach list of names and addresses of all owners of real property within 300 feet of the proposed short-term rental property with two sets of stamped addressed envelopes. The Town will provide return address.

| Fee Schedule Paid | Check # _____ | Short term rental permit: |
|-------------------|---|---------------------------|
| a. | \$500 for first permit; \$250 for annual renewal; | \$500.00 |
| b. | Business License 2020 | \$256.00 |
| c. | Safety Inspection if you choose SafeBuilt | \$75.00 |
| d. | Total | \$831.00 |
| e. | Board of Selectmen appeal application and review: | \$120.00 |

Submitted this _____ day of _____, 202__.

Owner signature _____

Town of Georgetown
 P.O. Box 426
 404 6th St.
 Georgetown, CO 80444
 303-569-2555
 FAX 303-569-2705

| |
|---------------------------------|
| Permit #: _____ |
| Job Address: _____ |
| Parcel ID: _____ Lot: _____ |
| Subdivision: _____ Block: _____ |

Signature of Owner Authorized Agent: _____ Application Date: _____

Description of Work: Life Safety Inspection

| | |
|--|------------------|
| Property Owner: _____ | Phone: _____ |
| Mailing Address: _____ | |
| Primary Contractor Contact Person: _____ | License #: _____ |
| Contractor Address: _____ | Phone: _____ |
| Service Contractor Contact Person: _____ | License #: _____ |
| Contractor Address: _____ | Phone: _____ |
| Service Contractor Contact Person: _____ | License #: _____ |
| Contractor Address: _____ | Phone: _____ |
| Service Contractor Contact Person: _____ | License #: _____ |
| Contractor Address: _____ | Phone: _____ |

IMPORTANT - COMPLETE ALL ITEMS AND MARK ALL APPLICABLE ITEMS

| | | | |
|-----------------------------|--|-------------------------------------|-------------------------------|
| SQUARE FOOTAGE | PROPOSED USE | TYPE OF HEAT | IMPROVEMENT TYPE |
| Main Floor _____ | Residential | ___ Gas LP or NG | ___ New Building |
| Add Floor _____ | ___ One Family | ___ Electricity | ___ Addition |
| Basement _____ | ___ Multi Family - Enter number of units - _____ | ___ Solar | ___ Remodel - Finish |
| Crawlspace _____ | ___ Hotel, motel, or dormitory - Enter number of units - _____ | ___ Other _____ | ___ Repair, replacement |
| Covered Porch _____ | ___ Garage - Single ___ Double ___ Attached ___ Detached | SEWAGE DISPOSAL | ___ Fence |
| Deck _____ | ___ Carport - Attached ___ Detached | ___ Public | ___ Roof |
| Garage _____ | ___ Patio - Attached ___ Detached | ___ Individual | ___ Other _____ |
| Other _____ | ___ Basement - Partial ___ Full ___ Finished ___ Unfinished | WATER SUPPLY | CONSTRUCTION TYPE |
| | ___ Fireplace - Masonry ___ C-Clearance _____ | ___ Private | ___ Wood Frame |
| | ___ Other _____ | ___ Public | ___ Structural Steel |
| | Commercial | | ___ Masonry |
| | ___ Shell Only _____ Sign _____ | | ___ Other _____ |
| | ___ Tenant Finish | | NOTES |
| | ___ Remodel - Addition | | |
| | ___ New Building | | |
| TOTAL VALUE | DEMOLITION | OCCUPANCY | MISCELLANEOUS |
| Building Valuation \$ _____ | ___ Site Plan | Classification: _____ | # of stories _____ |
| Use Tax Valuation \$ _____ | ___ State Permit | Construction Type _____ | Lot Size _____ |
| | ___ Asbestos Permit | Separated _____ Non-Separated _____ | Parking Spaces _____ |
| | | | Enclosed _____ Outdoors _____ |

FOR OFFICE USE ONLY:

| | | | |
|---------------------------|-----------------------|------------------|------------|
| FEES: Total: _____ | OTHER FEES: | SETBACKS: | REQ |
| Deposit _____ | ___ Other (Amt) _____ | Front: _____ | |
| ___ Permit Fee _____ | Description: _____ | Back: _____ | |
| ___ Plan Review _____ | | Side1: _____ | |
| ___ Use Tax _____ | ___ Other (Amt) _____ | Side2: _____ | |
| ___ Water Tap _____ | Description: _____ | | |
| ___ Sewer Tap _____ | | | |

RESIDENTIAL ONLY

of Bedrooms _____

Full Baths _____

3/4 Baths _____

1/2 Baths _____

The applicant, his agents and employees shall comply with all the rules, restrictions and requirements of the Municipality, and Building Codes governing location, construction and erection of the above proposed work for which the permit is granted. The Municipality, or its agents are authorized to order the immediate cessation of construction at anytime a violation of the order or regulations appears to have occurred. Violation of any of the codes or regulations applicable may result in the revocation of this permit.

Buildings MUST conform with plans as submitted to the Municipality. Any changes of plans or layout must be approved prior to the changes being made. Any change in the use or occupancy of the building or structure must be approved prior to proceeding with construction.

The applicant is required to call for inspections at various stages of the construction, and in accordance with the aforesaid rule, the applicant shall give the building inspector not less than one day's notice to perform such activities.

In the event construction is not commenced within 180 days of issuance of this permit, then the same is automatically void. Cessation of work for a period of 180 continuous days shall also cause this permit to be void. Permits are not transferable.

| | |
|--------------------|----------------------------------|
| Accepted By: _____ | Approved by City Official: _____ |
|--------------------|----------------------------------|

TOWN OF GEORGETOWN
P.O. Box 426 Georgetown, CO 80444
303-569-2555 x2 / townclerk@townofgeorgetown.us

BUSINESS LICENSE APPLICATION FOR 2020

THIS APPLICATION IS FOR A new license renewal • SALES TAX LICENSE NO. (if retail) _____

NAME OF BUSINESS OWNER _____

NAME OF BUSINESS (DBA) _____

STREET ADDRESS OF BUSINESS _____ City _____ State _____ Zip code _____

BUSINESS PHONE NO. _____ EMAIL ADDRESS _____

MAILING ADDRESS OF BUSINESS _____

LOCAL MANAGER (if not owner) _____

DESCRIPTION OF BUSINESS _____

BACKFLOW PREVENTER INSPECTION REPORT (IF REQUIRED) _____

TYPE OF BUSINESS OWNERSHIP Sole proprietor
 Partnership (not husband and wife)
 Partnership, husband and wife
 Corporation
 Limited Liability Company
 Other _____

DO YOU WISH TO BE LISTED ON THE TOWN'S WEBSITE YES NO

(signature of applicant) (date)

BUSINESS LICENSE FEES (annual) Please check all that apply.

- | | |
|---|---------------------|
| <input checked="" type="checkbox"/> License for business with its own address or outside of Georgetown | \$ 75.00 |
| <input type="checkbox"/> License for home occupation business within Georgetown | \$ 60.00 |
| <input type="checkbox"/> Renewal late fee (not applicable to out of town contractors) | Double fee |
| <input checked="" type="checkbox"/> Town sales tax fee for businesses that collect sales taxes | \$ 1.00 |
| <input type="checkbox"/> For each exterior vending machine (pop, cigarette, candy, ice but NOT newspaper) | \$ 35.00 |
| <input type="checkbox"/> For each interior amusement machine (games, etc.) | \$ 10.00 |
| <input type="checkbox"/> Sandwich Board Signs (information required listed on the back of this application) | \$ 50.00 first year |
| <input type="checkbox"/> Sandwich Board renewal | \$ 10.00 renewal |

PROMOTION ASSESSMENT FEES (annual - applicable only to businesses located in Georgetown)

- | | |
|--|----------|
| <input checked="" type="checkbox"/> Annual fee for business with its own address | \$180.00 |
| <input type="checkbox"/> Annual fee for home occupation businesses | \$ 35.00 |

TOTAL FEES DUE FOR 2020 \$ 256

THIS SECTION TO BE COMPLETED BY TOWN

DATE APPLICATION AND FEE RECEIVED _____
APPROVED DENIED TOWN CLERK: _____
CONDITIONS OF APPROVAL: _____

See other side