TOWN OF TAGHKANIC
483 County Route 15
Elizaville, NY 12523

RYAN SKODA — *Town Supervisor*
CHERYL ROGERS — *Town Clerk*
ERIC GAYLORD — *Highway Superintendent*

Application for Short Term Rental Certification

Contact Information:

Property Owner Contact:

Owner's Name: _____Phone Number: _____

Owner's Name: _____Phone Number: _____

Street Address: _____ Cell Phone: _____

Mailing Address: _____ Email: _____

Management Company or Local 24-hour Contact:

Name: _____ Home Phone: _____

Street Address: _____ Cell Phone: _____

Mailing Address: _____ Email: _____

Property Information:

New STR Permit ($400): _____ Renewal of Existing Permit ($200): _____

Section-Block-Lot: _____ Zoning District: _____

Is this a single-family home? YES NO If no, number of dwelling units: _____

Number of Bedrooms to be STR: _____ Maximum number of overnight guests: _____
*Please note that the term bedrooms does not include, living rooms, dens, family rooms, lofts, etc.

How many bathrooms are in the structure? _____

Number of Parking Spaces _____

What other structures are on the property? _____

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Required Submittals:

- Must Provide to scale Site Plan that includes:
  - All Existing Structures
  - Parking Layout
  - Location of well, septic and reserve field
  - Garbage Location
  - Property Boundaries
- Floor Plan of Home
- Garbage Removal Plan
- Safety/Egress Plan – To be posted in rental unit on the back of each bedroom door with Emergency Contact information and E911 Address
- Documentation that the rental unit has been inspected by the CEO and found to be in compliance with all health, fire, and safety requirements.
- Proof of Ownership and a notarized attestation or other documentation that establishes Owner's presence in the Dwelling for a Minimum of 60 nights per calendar year.
- Self-Inspection Checklist

Notice: Only those structures and uses that have received a Certificate of Occupancy may be legally occupied pursuant to the Taghkanic Town Code. The issuance of a Short-Term Rental Certificate for a property does not mean that all structures, or portions thereof, on said property may be legally occupied. Please consult the Building Department as to any questions about open building permits and legal uses.

Under penalties of perjury, I declare that I have completed this application and to the best of my knowledge and belief it is true, correct and complete, and I further declare that I have authority to sign this application and that I am the owner of said property.

Print Name: _____

Signature of Owner: _____Date: _____

Signature of Management: _____ Date: _____

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THIS PAGE IS FOR THE CODE ENFORCEMENT OFFICER

This property has no outstanding violations: _____

This property approved for rentals of no more than _____ persons staying overnight

This property has _____ parking spots

Certificate approved by: _____ Date: _____

Fees Paid: _____ Received by: _____

County Registration Number: _____ STR Number: _____

Safety/Egress Plan sent to local Fire Company _____-

Short Term Rental Self Inspection Checklist

➢ Please check first column if condition is met	**Yes**	**No**
EXTERIOR OF HOUSE:		
1. House # is posted in numerals a minimum of 4 inches tall	_____	_____
2. County 911 sign is posted where the driveway meets the road and is visible from the street	_____	_____
3. Is there a swimming pool?	_____	_____
a. There is a code compliant fence around pool.	_____	_____
b. Pool gates are self-closing, self-latching and lockable.	_____	_____
c. There is a working alarm on every door to the pool area	_____	_____
d. There is an alarm in the pool	_____	_____
INTERIOR OF HOUSE:		
4. Are there handrails on all stairways?	_____	_____
5. The electrical panel is properly marked	_____	_____
6. Smoke detectors are installed and working on every level	_____	_____
7. Carbon monoxide detectors are installed and working on every level	_____	_____
8. Smoke detectors are installed and working in every bedroom	_____	_____
9. Smoke detectors are installed and working in every sleeping area	_____	_____
10. Smoke detectors are within 10 feet of any bedroom door in the hallway	_____	_____
11. Smoke and carbon monoxide detector batteries are replaced regularly	_____	_____
12. Is there a Fire Extinguisher (10 pound or 2A 10BC)?		
13. Is there a burglar/fire alarm system?	_____	_____
14. Is the ingress/egress plan posted on the back of every bedroom door?	_____	_____
FIREPLACE/WOOD BURNING STOVE:		
15. Each fireplace or wood-burning stove has a door.	_____	_____
16. Active chimney has been cleaned in last 12 months.	_____	_____
SEPTIC		
17. Septic inspection within 3 years of the date of STR Registration.	_____	_____

ELISABETH ALBERT *PERRY ASCHER* *DOUG CRAIG* *LINDA MIRABELLI*

Taghkanic Town Board Members