



Application
Short-Term Rental Accommodation (STR) Licence
Bylaw 2020.11

- **New STR Licence**
- **STR Licence Renewal**
(Check one)

1. Property Information (Property to be licensed)

Address:	
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2. Applicant

Applicant type: (Check One)	<input type="radio"/> Owner	<input type="radio"/> Authorized Agent
Applicant Name(s):		
Corporation or Partnership Name: (If applicable)		
Applicant's Address:		
Telephone Number:		
Mobile Number:		
Email Address:		

3. Owner Information (if different from applicant)

Owner's Name(s)		
Corporation or Partnership Name: (If applicable)		
Owner's Address:		
Telephone Number:		
Mobile Number:		
Email Address:		

4. Rental/Booking Agent/Agency (Attach additional document for multiple agent/agencies)

Rental/Booking Agent/Agency:		
Corporation or Partnership Name: (If applicable)		
Agent or Agency Address:		
Telephone Number:		
Mobile Number:		
Email Address:		

Notice of Collection: The personal information recorded on this form is collected and maintained in accordance with MFIPPA - the Municipal Freedom of Information and Privacy Protection Act and will be used in the administration and enforcement of the Short-Term Rental Accommodations Licensing Bylaw. Questions about the collection of personal information may be addressed to the Records and Information Coordinator, Township of Ramara, 2297 Highway 12, P.O. Box 130, Brechin, ON L0K 1B0, 705-484-5374.



5. Responsible Person (Person responsible for the operation and conduct of the inhabitants as defined in Bylaw 2020.11) – Please complete Schedule 1

Responsible Person's Name:	
Corporation or Partnership Name: <i>(If applicable)</i>	
Address:	
Telephone Number:	
Mobile Number:	
Email Address:	

6. Property Details:

Current use of property:	
Proposed Number of Bedrooms:	
Proposed STR Occupant Load (8 maximum):	

7. Attachments (*the following must accompany the application*)

- Copy of municipal tax bill proving ownership
- Copy of government issued photo I.D. with applicant's Date of Birth
- Copy of the liability insurance policy of not less than \$2 million per occurrence for property damage and bodily injury (**must include a clause that the Township of Ramara will be notified of any intended cancelation with fifteen (15) days of the cancelation**)
- Floor plans drawn to scale (**dimensions, type & occupancy of each room, occupant load for sleeping purposes for each room, location of smoke detection/early warning devices, fire extinguishers**)
- Site Plan drawn to scale with dimensions (**parking locations, landscaping, buildings, structures and septic system/well, if applicable**)
- Renter's Code of Conduct
- Responsible person's consent form (**information to be published on the township *website***)
- Annual Licensing Fee - \$1000.00 (**cash, cheque or debit**)

8. Owner's Consent (if the owner is not the applicant)

I _____, being the owner of _____,
(Print Name) (Address)

Authorize _____, to file the above application for a STR licence.
(Print Name)

Date

Signature



9. Declaration of Applicant

I _____ CERTIFY THAT:

(Print Name)

The information contained in this application, attached schedules, attached plans and specifications and other attached documentation is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership. I also acknowledge that the municipal address of the Short-term Rental Accommodation listed on this application will be posted on the Township of Ramara website as a licensed location and available for the general public to view.

Date

Signature

For Internal Use Only		
Date Application Received:	Payment Type <input type="radio"/> Cash <input type="radio"/> Cheque <input type="radio"/> Debit	Receipt #:

Return completed forms and all attachments to:

Township of Ramara
2297 Highway 12, P.O. Box 130
Brechtin, ON L0K 1B0

Attn: Bylaw & Licensing Supervisor