

# Bemidji Township Short Term Rental Application

This form must be legibly completed in INK or typewritten.

License Type:       New                       Renewal                      After-the-Fact Application?  Yes  No

Tax parcel number(s): \_\_\_\_\_

STR E911 property address: \_\_\_\_\_

Company contracting through for Short Term Rental (EX: Vrbo, Airbnb, ETC.): \_\_\_\_\_

Applicant name(s): _____ <input type="radio"/>	Date: _____
Are you the titled owner(s):      Yes <input type="radio"/> No <input type="radio"/>	
Mailing address: _____	
Phone: _____ Alt. phone: _____ Email: _____	

Current contact person: _____ (Party responsible for responding to questions/concerns/complaints.)
Relationship to Owner: _____
Mailing address: _____
Contact person's distance, or travel time, from STR: _____
Phone: _____ Alt. phone: _____ Email: _____

- Number of short-term rental dwelling units proposed to be operated on subject property: \_\_\_\_\_
- Will the short-term rental structure also be owner-occupied at times?  Yes  No
- Will an owner or manager reside onsite when the short-term rental is being actively rented?  Yes  No

### Please select the size STR you are applying for:

- Type A: Unit having up to 3 bedrooms, and maximum occupancy of 8 people (or less)**
- Type B: Unit exceeds Type A sizes, and has maximum occupancy of 12 people (or less)**

What is the maximum occupancy you are applying for (maximum # of guests): \_\_\_\_\_

How many bedrooms does your structure contain: \_\_\_\_\_

### Application Checklist (be sure to submit all of the following):

1. Complete, signed application form.
2. Authorized agent form, if applicant is not owner, or application not signed by owner.
3. Color parcel map printout of property with short-term rental structure clearly marked/labeled OR aerial view site plan sketch on which short-term rental structure is clearly marked/labeled.
4. Current septic system certificate of compliance (inc. tank sizing, drain field type and sq. ft., and soil sizing factor IF design flow not available.)
  - a. If SSTS predates permitting requirements or permit records lack a conclusive design flow number, attach current COC that documents septic tank capacity, drain field type and square footage, soil sizing factor for drain field location, and the inspector's design flow determination.
  - b. If the SSTS services one or more structures in addition to the short-term rental for which this license is requested, please contact Environmental Services staff for assistance in determining the design flow for the short-term rental.
5. Payment for the application fee.

Permit Fee: \_\_\_\_\_ Check #: \_\_\_\_\_ Date Paid: \_\_\_\_\_

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## Applicant Agreement

- I understand and agree that my short-term rental (STR) property must be operated and maintained in accordance with Bemidji Township Ordinances and all issued Permit provisions and that the Township must be notified in writing of any change of information provided with or placed on file with this application.
  - I understand that it is required that Beltrami County property tax payments for the property on which this STR use is proposed to occur are not delinquent at the time this application is submitted and during the STR permit period. I attest that no past due property taxes are due or applicable concerning the STR property that is the subject of this application.
  - I understand and agree that the property owner shall keep on file with the Township the name, current telephone number, and email address of a current contact person who is responsible for responding to questions or concerns regarding the operation of the STR.
  - I understand and agree that the following documentation must be kept on file and provided to the Zoning Administrator or Deputy Zoning Administrator within 5 days upon request by the Township:
    - Demonstration that the STR operation has a license issued by the Minnesota Department of Health or written certification from the property owner that states that a license is not required from the State of Minnesota and that sufficiently explains the reasons that no license is required (i.e., a statement written by the property owner, not MDH).
  - I understand and agree that sufficient vehicle parking for STR occupants shall be accommodated completely onsite and off-street.
  - I understand and agree that quiet hours of 10:00 p.m. to 8:00 a.m. are required to be kept by STR users during which time noise levels need to be minimized. I also understand and agree that no outdoor music or outdoor parties are allowed during these quiet hours' time periods and that a STR owner is expected to enforce these quiet hours.
  - I understand and agree that the following information will be posted within the rental unit in a prominent location so as to be easily visible and read by the guests:
    - A map clearly showing the property lines of a property on which a short-term rental use is occurring must be provided to rental customers and included in a rental customer informational guest book kept in a clearly visible and readily accessible location in the STR structure.
    - The full name and phone number of the local contact person or local management agent.
    - Local emergency contact information (law enforcement, fire, ambulance).
    - The maximum number of overnight guests approved in the STR license.
    - A copy of the Beltrami County Good Neighbor Brochure.
- I understand and agree that the total permitted overnight guest occupancy will be included on all advertisements or web-based reservation service pages.
- I understand and agree that no more than one STR structure is allowed to be operated on a shoreland zone lot.
  - I understand that storage, collection, and disposal of solid waste must comply with the Beltrami County Solid Waste Ordinance #13, or any successor or replacement.
  - I understand that a STR permit cannot be transferred to a different party than the one permitted.
  - I understand that any violation of any of these criteria may result in the suspension/revocation of the STR permit.

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- I understand that the Zoning Administrator or Deputy Zoning Administrator may contact me in the course of investigating a complaint regarding my STR(s) and agree to fully and timely cooperate with any such investigation and provide any requested information and access to the property.
- I understand that the Zoning Administrator or Deputy Zoning Administrator will randomly audit a portion of all STR permits annually for SMO compliance and agree to fully and timely cooperate with any such audit and provide any requested information and access to the property.

### **Applicant Statement**

I have read and fully understand the above instructions and information. I hereby make application for a STR permit, agreeing to operate such a use in accordance with all Beltrami County Ordinances and Bemidji Township Ordinances. In making this application, I hereby affirm that I am the fee title owner of the above- described property, or the authorized agent thereof, and I agree to this application and warrant and assert that I am authorized by ownership and/or law to apply for the STR permit in question. By signing this application, I hereby certify that the information contained in this application is a true, accurate and complete representation of facts and conditions concerning the proposed STR permit application. I hereby state and affirm that any and all applications, sketches, surveys, and all other attachments and documents submitted herewith are true and accurate. I understand that if any of the information provided by me in this application is later found or determined by the Township to be inaccurate, the Township will revoke the STR permit and/or any accompanying permit based upon the supplying of inaccurate information. I understand and agree that in making application for a STR permit, I am granting permission to Bemidji Township, at reasonable times and in a reasonable manner, to enter the land and premises that are the subject of this application to determine compliance of that application with any applicable township, county, state, or federal laws, statutes, or ordinances. I certify and agree that I will comply with any and all conditions imposed in connection with the approval of the application. I understand that I may be required to submit additional property descriptions, property surveys, site plans, building plans, or other information as deemed necessary by the Township for proper consideration of the request before the application is deemed complete or acted upon.

**Signature of applicant(s):\_**

# Bemidji Township Short Term Rental Application

**Rental Safety Inspection Report: Due every 3 yrs**

**Date:** \_\_\_\_\_

**Parcel Number:** \_\_\_\_\_

## Owner Inspection Requirement:

Drainage around building?  
\_\_\_\_\_

Are there noxious weeds around building or on property? \_\_\_\_\_

Who mows the yard? \_\_\_\_\_

Accessory structures-garage, fences, walls in disrepair? \_\_\_\_\_

Is compliance with Township Land Use Ordinance Section D: \_\_\_\_\_

Section D. Junk, Vehicles, Trash and Nuisance/Public Nuisance It is unlawful to park or store any obviously inoperable and/or abandoned and/or partially dismantled motor vehicle or the remains thereof, junk, trash, household furnishings, appliances, and/or parts or components thereof, on any property, public and/or private, unless housed within a lawfully erected building. Any violation of this Section is declared to be a nuisance and upon seven days of written notice to the property owner as declared by the records in the office of the Beltrami County Auditor, of private premises on which such material is found, the Township may remove the same and certify the cost of such removal as any other special assessment.

Sidewalks and Driveway In disrepair? \_\_\_\_\_

Rats or Rodents around property? \_\_\_\_\_

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Owner Signature: \_\_\_\_\_

## Licensed Electrician:

Electrical panel adequate service? \_\_\_\_\_

Any openings on panel? \_\_\_\_\_

Open outlets all have covers? \_\_\_\_\_

Any exposed electrical wire? \_\_\_\_\_

Ground working on outlets? \_\_\_\_\_

Ground fault where needed? \_\_\_\_\_

Smoke detectors where they are supposed to be located and working? \_\_\_\_\_

Fire Extinguishers? \_\_\_\_\_

Carbon Monoxide detector and working?  
\_\_\_\_\_

Everything Compliant that should be? Comments:

**Electrician License number:** \_\_\_\_\_

**Electrician Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Licensed Plumber:

Any Water pipe leaks? \_\_\_\_\_

Any drain pipe leaks? \_\_\_\_\_

All drains working? \_\_\_\_\_

Venting for drain pipe? \_\_\_\_\_

Water heater working? \_\_\_\_\_

Everything Compliant that should be? Comments?

**Plumber License Number:**  
\_\_\_\_\_

**Plumber Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## General Contractor:

**Exterior Structure:**

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Are decks, porches, exterior stairs in disrepair? \_\_\_\_\_

Exterior siding in disrepair? \_\_\_\_\_

Roof in disrepair? \_\_\_\_\_

Hand rails and guardrails where needed and in disrepair? \_\_\_\_\_

Windows and doors in disrepair? \_\_\_\_\_

### **Interior Structure:**

If stairs, are they in disrepair? \_\_\_\_\_

Hand rails where needed and in disrepair? \_\_\_\_\_

Any of the walls in disrepair? \_\_\_\_\_

All bedrooms have egress windows that meet code?

\_\_\_\_\_

Are any of the interior doors in disrepair?

\_\_\_\_\_

Everything interior and exterior compliant that should be? Comments:

**General Contractor License Number:**

\_\_\_\_\_

**General Contractor Signature:**

\_\_\_\_\_ **Date:** \_\_\_\_\_

**Copy SSTS Certificate of Compliance Report:**

**Copy Department of Health Inspection Year:**