

BUSINESS LICENCE APPLICATION

SHORT-TERM RENTAL (STR)

Applicant Information					
Name		Email			
Work Phone		Cell Phone			
Business Name					
Mailing Address					
(Street Address)		(City)	(Province)	(Postal Code)	
STR Address					
(Street Address)		(City)	(Province)	(Postal Code)	(Zoning) Office Use Only
Is the property you wish to operate owned by a landlord or under a condominium association, homeowner's association, property management company, or similar authority?	Property Owner?		Homeowners Association?		If you are not the owner or are part of a HOA you must submit a letter from the outlining consent to operate on the property and any other conditions set by the affiliate.
	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO					
IF YOU ARE NOT THE PROPERTY OWNER, PLEASE FILL OUT THE FOLLOWING INFORMATION:					
Property Owner Information					
Name					
Work Phone		Cell Phone			
Email					
Mailing Address					
(Street Address)		(City)	(Province)	(Postal Code)	
What type of Short-Term Rental do you plan on operating?	<input type="checkbox"/> Principal		<input type="checkbox"/> Non-Principal		<input type="checkbox"/> Non-Resident
	You want to operate an STR in the same home or on the same property where you live for the majority of the calendar year		You live in the Town of Drumheller but do not live in the short-term rental or on the property of the short-term rental you plan on operating for the majority of the calendar year		You do not live in the Town of Drumheller but is operating a short-term rental within the jurisdiction
A HOST CANNOT ALLOW MORE THAN TWO ADULTS PER BEDROOM, NOT INCLUDING MINORS. PLEASE PROVIDE THE MAXIMUM NUMBER OF BEDROOMS AND THE MAXIMUM NUMBER OF GUESTS YOU ANTICIPATE AT ANY GIVEN TIME:					
Number of Bedrooms:		Max Number of Guests			

Supporting Documentation		
AN APPLICATION WILL ONLY BE CONSIDERED COMPLETE ONCE ALL THE FOLLOWING SUPPORTING DOCUMENTATION HAS BEEN RECEIVED AND VERIFIED BY TOWN STAFF.		
	Documentation	Description
<input type="checkbox"/>	Two (2) pieces of Identification	Two pieces of government issued identification is required in order to verify your identity.

<input type="checkbox"/>	Home Escape Plan	A floor plan detailing two (2) exits from each room, such as through a window or door, the location of all rooms and doors, the location of sleeping spaces, the number of beds per sleeping space, the location of smoke alarms, carbon monoxide detectors and fire extinguisher(s); and the location of a muster point outside the home.
<input type="checkbox"/>	Photos	Photos of all sleeping spaces and facilities that will be used by guests (living rooms, kitchen, bathrooms etc. The photos will be used in conjunction with the Home Escape plan to ensure the space is safe for guests. Require a minimum of five (5) photos.
<input type="checkbox"/>	Emergency Contact List	Emergency Contact list must provide information on 1) the name, phone number and email address of an emergency contact person who can be reached twenty-four (24) hours per day during rental periods, 2) The contact information for local emergency services in the Town of Drumheller and 3) The Town of Drumheller SeeClickFix STR Compliant Portal. Templates can be found online at Drumheller.ca.
<input type="checkbox"/>	Insurance	Must provide proof of some form of Home-sharing or Short-Term Rental Insurance. Home-Sharing Insurance is specifically designed for people who rent out their homes on a short-term basis and covers losses not covered by the host protection insurance offered by online brokers such as Airbnb or VRBO, or by traditional home insurance.
<input type="checkbox"/>	Proof of Primary Residence	May include utility bills with the occupant's name and address, a driver's license with the address, or proof of voter registration. One of the two (2) pieces of identification may be used as proof of primary residence.
<input type="checkbox"/>	Property Owner Authorization (if Applicable)	If you are part of a condo association, property management company, or if you are leasing the property, you must provide permission from the landowner or association granting explicit permission to operate an STR, with any other conditions set by the affiliate.

Applicant's Declaration:		
IN SUBMITTING THIS FORM, I AM DECLARING THIS INFORMATION TO BE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.		
Applicant Name	Signature	Date
(Initial Here)	I have read and understand the Town of Drumheller <i>Good Host Guide</i> and agree to comply with the requirements therein.	
(Initial Here)	I have read and understand the Town of Drumheller Business License Bylaw and agree to comply with all the provisions within this Bylaw and all Federal, Provincial and Municipal Statutes.	
(Initial Here)	I authorize the Town of Drumheller to advertise my business on Drumheller.ca and to disclose the applicable information to the Drumheller Chamber of Commerce for communication purposes.	
(Initial Here)	I certify that the information in my application is true and that my application is complete in its entirety to the best of my knowledge. I acknowledge that incomplete applications will not be accepted and that any misinformation could result in the rejection of my application.	

The Town of Drumheller will not receive payment until the application is deemed complete. The application fee is non-refundable. You will receive notice of complete application and a notice of decision regarding this application.

Approval of this Business License does not exempt the applicant from obtaining necessary permits required through Municipal Bylaw or Provincial Laws and Regulations. This information is being collected under the authority of the Town of Drumheller for the purpose of providing licensing and advertising. It is protected by the privacy provisions of the Freedom of Information and Protection of Privacy Act. For more information contact the Town of Drumheller FOIP Coordinator at info@drumheller.ca or 403-823-1339.

Office Use Only			
Licence #		Receipt #	
Date		Time	