



429 Hallowell Rd, Pownal, Maine 04069 Phone: (207)688-4611

Application for Short-Term Rental Registration

Type of Application

<input type="checkbox"/> New Short-Term Rental Registration
<input type="checkbox"/> Short-Term Rental Registration Annual Renewal – with <u>no</u> changes from past year registration Information. Prior Registration Number: _____
<input type="checkbox"/> Short-Term Rental Registration Annual Renewal – with changes from past year registration information. Prior Registration Number: _____

Property Information

Short-Term Rental Property Address:	
Tax Map and Lot:	
Dwelling Type:	<input type="checkbox"/> One-Family <input type="checkbox"/> Two-Family <input type="checkbox"/> Multiple Family <input type="checkbox"/> Room in Owner-Occupied House <input type="checkbox"/> Campsite <input type="checkbox"/> ADU <input type="checkbox"/> Other (describe) _____

Property Owner Information

Property Owner Name:	
Mailing Address:	
Phone Number:	
Email Address:	

Local Emergency Contact Information

The owner must identify a registered agent or representative for emergency contact purposes. The emergency contact may be the property owner.

The emergency contact person must be able to respond within sixty (60) minutes (24 hours per day) to complaints regarding the condition, safety or operation of the short-term rental or the conduct of guests and must be able to take such remedial action on behalf of the owner, or as otherwise allowed by law, to resolve such complaints.

Emergency Contact Name:	
Physical Address:	
Phone Number:	
Email Address:	

Details of Rental Unit

Please attach proof of occupancy limits:	Limits will be based on the number of bedrooms listed on the building permit, approved septic system design or certificate of occupancy for the property. In the case of a dwelling legally existing without any of the information listed above, the number of bedrooms shall be based upon the historic and traditional use of the structure as represented by the property owner.
Determined occupancy limit (two guests per legal bedroom plus no more than two additional guests):	_____
Wastewater Disposal Type:	<input type="checkbox"/> Public Sewer <input type="checkbox"/> Private Septic System <input type="checkbox"/> Shared Septic System <input type="checkbox"/> Other (describe) _____
Please explain how the off-street parking requirement will be met:	Please attach a narrative or drawing to demonstrate how parking will be provided.
Please attach proof of insurance:	The owner must provide a certificate of insurance that expressly acknowledges that the property may be used for short-term rental business activity and evidencing general liability insurance appropriate to cover the short-term rental use in the aggregate of not less than \$1 million, or proof that the owner conducts short-term rental transactions through a hosting platform that provides equal or greater coverage. The owner must maintain such insurance coverage while rented.

OWNER / APPLICANT ACKNOWLEDGEMENT OF RESPONSIBILITIES

The signature below certifies that I am a legal owner of the subject property and that the information provided on this form is in all respects true and accurate to the best of my knowledge and belief. I agree that I have reviewed the Town of Pownal's STR policy and understand the described requirements and agree to abide by them.

Signature of Legal Owner

Date

Printed Name of Legal Owner

SUBMISSION CHECKLIST:

- Completed application form, required attachments and applicable fee
- Copy of proof of ownership (recorded deed)
- Copy of proof of insurance
- Proof of occupancy limits
- Completed Self-Inspection checklist

Date Received _____, Received by _____

Date Inspected _____, Inspected by _____

Date of Approval _____, Approved by _____

Town of Pownal Code Enforcement Officer

Town of Pownal's Short-Term Rental Owner's Self-Inspection Checklist

Applicant Name: _____ Date: _____

Address of Short-Term Rental: _____

Self-Certification- Prior to registering a short-term rental, the applicant must certify and initial the following requirements:

_____ Tenants and guests of Short-term rentals are prohibited from parking in a manner that impedes access by emergency vehicles to the property or any other dwelling in the neighborhood.

_____ I certify that an evacuation plan has been created and will be posted in a visible location in the short-term rental property in case of emergency.

_____ I certify that the house is properly identified with their legal street number and in accordance with the Town of Pownal's Addressing and Road Naming Ordinance.

_____ I certify that the short-term rental has at least one appropriately sized portable fire extinguisher that is mounted in a prominent location.

_____ I certify the dwelling unit(s) complies with the following Life Safety standards:

1. The "2013 Egress Policy" issued by the Office of the State Fire Marshal;
[egress_window_policy_2013.pdf](#)
2. State of Maine Title 25, §2464: Smoke detectors;
<https://www.mainelegislature.org/legis/statutes/25/title25sec2464.pdf>
3. State of Maine Title 25, §2468: Carbon monoxide detectors.
<https://www.mainelegislature.org/legis/statutes/25/title25sec2468.pdf>

_____ I agree to adhere to the Pownal Solid Waste Collection and Disposal Ordinance and to ensure that solid waste is removed from the property prior to new guests entering the property.

_____ I understand that my short-term rental advertising shall clearly note the number of permitted bedrooms for the rental unit. The advertising shall not include offering the short-term rental for non-residential uses such as corporate events, large weddings, or other similar events.

I (we) understand that providing false information in the application shall be a violation of the Town of Pownal Short-term Rental Policy, and shall be grounds to deny an application, void an approval, and/or revoke a Short-Term Rental Registration Certificate issued for the property.

Signature of Legal Owner

Date

Printed Name of Legal Owner