



**LIMITED COMMERCIAL VACATION RENTAL LICENSE
APPLICATION INSTRUCTIONS**

The items listed below are required to be submitted with the completed application.

- Application:** Filled out completely, signed and notarized
- Residential Property Self-Inspection Safety Checklist (form enclosed):** Included in application package. Must be completed, signed and notarized.
- Attach Entity Disclosure:** corporate records indicating all present any owner, officer, director, principal, shareholder, partner, settlor, trustee, beneficiary and/or member
- Attach Certificates of Occupancy and Compliance:** Certificates of occupancy and/or compliance for all structures on the property, Building Permit Application is needed if any structures on the subject property do not hold a certificate of occupancy or compliance.
- Fees:** \$150

LIMITED COMMERCIAL VACATION RENTAL LICENSE APPLICATION

I. Property Information:

Property Address: _____, Shelter Island New York, 119_____

Rental Registry Number (Leave blank if submitted with registration form): _____

If there is more than one structure on the property indicate which structure(s) will be rented: _____

II. Owner Information:

Property Owner Name: _____

Property Owner Legal Address: Property Owner Mailing Address: (Cannot be the same as Rental Property Address) _____

Telephone Daytime: _____ Evening Emergency: _____

Property Owner Email Address: _____@_____.

III. Corporate Disclosure

If the dwelling intended for rental occupancy is owned by a corporation, partnership, trust, Limited Liability Company or any entity other than a natural person, the following must be provided:

- The name, address, telephone number of each owner, officer, director, principal, shareholder, partner, settlor, trustee, beneficiary and/or member of such business entity;
- Formation or operational documents showing the above associations must be attached
- A representative with authority to make decisions for the entity must be identified and such person must provide:

Name: _____

Title or position with the owning entity: _____

Legal Address (No P.O. Boxes): _____

Telephone Daytime: _____ Evening Emergency: _____

Property Owner Email Address: _____@_____

IV. Local Contact Person Information:

Name of Local Contact Person: _____

Address of Local Contact Person : _____ Shelter Island, New York 119__ (no P.O. Boxes, must reside on Shelter Island)

Mailing Address of Local Contact Person: _____

Telephone Daytime: _____ Evening Emergency: _____

Property Owner Email Address: _____@_____

V. Designation of Agent for Service of Process

The property owner, _____,

residing at _____, Town of _____, State of _____

Or

a partnership, a Limited Liability Company, a trust, a corporation duly organized pursuant to the laws of the State of _____, with a business office located at _____, Town of _____, State of _____ by its _____ and authorized representative, _____ does hereby designate:

The Town Clerk of the Town of Shelter Island with an office at 38 North Ferry Road, Town of Shelter Island, County of Suffolk, State of New York,

Or

_____ located at _____, Shelter Island, New York 119____

as his [her or its] agent for service pursuant to CPLR 318.

Vacation Rental Structure Information:

Total Number of Conventional Bedrooms as per Certificate of Occupancy: _____

Maximum Number of Renters allowed: _____

Certificate of Occupancy or Compliance attached

Residential Property Self-Inspection Safety Checklist Attached

RENTAL PROPERTY SELF-INSPECTION SAFETY CHECKLIST

All questions must be answered. Failure to answer any question will delay your issuance of a Rental Permit Number. Please check box if condition is met

EXTERIOR OF THE HOUSE

1. House # is posted in numerals a minimum of 4 inches tall. ()
2. House # is visible from the street. ()
3. Is there a swimming pool? YES () NO () If NO, go to #8
4. There is a code compliant,
4 foot high fence around pool. ()
5. Pool gates are self-closing, self-latching and lockable. ()
6. There is a working alarm on every door to the pool area. ()
7. There is an alarm in the pool. ()

INTERIOR OF THE HOUSE

8. How many bedrooms are in the house?
9. How many levels, including a basement, if applicable, are in the house?
10. Is there a lower-level recreation area? YES () NO ()
11. Is there a lower-level sleeping area? YES () NO ()
12. There are handrails on all stairways. ()
13. The electrical panel is properly marked. ()

SMOKE DETECTORS/CARBON MONOXIDE DETECTORS

14. Smoke detectors are installed and working on every level. ()
15. Carbon monoxide detectors are installed and working on every level. ()
16. Smoke detectors are installed and working in every bedroom. ()
17. Smoke detectors are installed and working in every sleeping area. ()
18. Smoke detectors are installed within 10 feet of any bedroom door in the hallway. ()
19. Smoke and carbon monoxide detector batteries are replaced regularly. ()

FIREPLACE/WOOD BURNING STOVE

20. Does your home have a fireplace or wood-burning stove? YES () NO () If YES, answer #21

21. The fireplace or wood-burning stove has a door(s) or screen(s). YES () NO ()

NOTICE: Only those structures and uses that have received a Certificate of Occupancy may be legally occupied pursuant to the Shelter Island Town Code. The issuance of a Rental License number for a property does not mean that all structures, or portions thereof, on said property may be legally occupied. Please consult with the Building Department as to any questions about open building permits and legal uses. Sworn to under penalty of perjury:

Property Owner's Name (Print) _____

Owner's Original Signature _____

Sworn to before me this ____ day of _____, 201__ .

(Notary Public)