

TOWN OF TAGHKANIC

483 County Route 15

Elizaville, NY 12523

*RYAN SKODA
Town Supervisor*

*CHERYL ROGERS
Town Clerk*

*ERIC GAYLORD
Highway Superintendent*

Application for Short Term Rental Certification

Contact Information:

Property Owner Contact:

Owner's Name: _____ Phone Number: _____

Owner's Name: _____ Phone Number: _____

Street Address: _____ Cell Phone: _____

Mailing Address: _____ Email: _____

Management Company or Local 24-hour Contact:

Name: _____ Home Phone: _____

Street Address: _____ Cell Phone: _____

Mailing Address: _____ Email: _____

Property Information:

New STR Permit (\$400): _____ Renewal of Existing Permit (\$200): _____

Section-Block-Lot: _____ Zoning District: _____

Is this a single-family home? YES NO If no, number of dwelling units: _____

Number of Bedrooms to be STR: _____ Maximum number of overnight guests: _____

*Please note that the term bedrooms does not include, living rooms, dens, family rooms, lofts, etc.

How many bathrooms are in the structure? _____

Number of Parking Spaces _____

What other structures are on the property? _____

ELISABETH ALBERT

PERRY ASCHER

DOUG CRAIG

LINDA MIRABELLI

Taghkanic Town Board Members

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Required Submittals:

- ❖ Must Provide to scale Site Plan that includes:
 - All Existing Structures
 - Parking Layout
 - Location of well, septic and reserve field
 - Garbage Location
 - Property Boundaries
- ❖ Floor Plan of Home
- ❖ Garbage Removal Plan
- ❖ Safety/Egress Plan – To be posted in rental unit on the back of each bedroom door with Emergency Contact information and E911 Address
- ❖ Documentation that the rental unit has been inspected by an independent licensed New York State Home Inspector and found to be in compliance with all health, fire, and safety requirements.
- ❖ Proof of Ownership and a notarized attestation or other documentation that establishes Owner’s presence in the Dwelling for a Minimum of 60 nights per calendar year.
- ❖ Self-Inspection Checklist

Notice: Only those structures and uses that have received a Certificate of Occupancy may be legally occupied pursuant to the Taghkanic Town Code. The issuance of a Short-Term Rental Certificate for a property does not mean that all structures, or portions thereof, on said property may be legally occupied. Please consult the Building Department as to any questions about open building permits and legal uses.

Under penalties of perjury, I declare that I have completed this application and to the best of my knowledge and belief it is true, correct and complete, and I further declare that I have authority to sign this application and that I am the owner of said property.

Print Name: _____

Signature of Owner: _____ Date: _____

Signature of Management: _____ Date: _____

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THIS PAGE IS FOR THE CODE ENFORCEMENT OFFICER

This property has no outstanding violations: _____

This property approved for rentals to no more than _____ persons staying overnight

This property has _____ parking spots

Certificate approved by: _____ Date: _____

Fees Paid: _____ Received by: _____

County Registration Number: _____ STR Number: _____

Short Term Rental Self Inspection Checklist

➤ Please check first column if condition is met

Yes

No

EXTERIOR OF HOUSE:

- | | | |
|---|-------|-------|
| 1. House # is posted in numerals a minimum of 4 inches tall | _____ | _____ |
| 2. County 911 sign is posted where the driveway meets the road and is visible from the street | _____ | _____ |
| 3. Is there a swimming pool? | _____ | _____ |
| 4. There is a code compliant fence around pool. | _____ | _____ |
| 5. Pool gated 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 HOUSE:

- | | | |
|--|-------|-------|
| 8. Are there handrails on all stairways? | _____ | _____ |
| 9. The electrical panel is properly marked | _____ | _____ |
| 10. Smoke detectors are installed and working on every level | _____ | _____ |
| 11. Carbon monoxide detectors are installed and working on every level | _____ | _____ |
| 12. Smoke detectors are installed and working in every bedroom | _____ | _____ |
| 13. Smoke detectors are installed and working in every sleeping area | _____ | _____ |
| 14. Smoke detectors within 10 feet of any bedroom door in the hallway | _____ | _____ |
| 15. Smoke and carbon monoxide detector batteries are replaced regularly | _____ | _____ |
| 16. Is there a Fire Extinguisher (10 pound or 2A 10BC)? | _____ | _____ |
| 17. Is there a burglar/fire alarm system? | _____ | _____ |
| 18. Is the ingress/egress plan posted on the back of every bedroom door? | _____ | _____ |

FIREPLACE/WOOD BURNING STOVE:

- | | | |
|---|-------|-------|
| 19. Does the STR have a fireplace or wood-burning stove? | _____ | _____ |
| 20. How many fireplaces or wood burning stoves does the STR have? | _____ | _____ |
| 21. The fireplace or wood burning stove has a door(s) or screens(s) | _____ | _____ |

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