

VILLAGE OF SISTER BAY SHORT TERM RENTAL LICENSE APPLICATION

 \square Valid State of Wisconsin Tourist Rooming House License

 \square Copy of the most recent DATCP Inspection Report or Home Inspection Report

For Staff Use License No.	
Date Issued:	
Expiration Date: June 30,	
Max. No. of Guests Approved	

	LICENSE APPLICATION	Expiration Date: June 30,	
	LICENSE AFFEICATION	Max. No. of Guests Approved	
FEES: \$1500.00 (initial beginning March 1 for the expiration date are not §	ial app) or \$1000.00 (renewal app). Fee the license year beginning July 1. Licer guaranteed to be approved by July 1st. L	es are not prorated or refundable. Applications are accepted use requests received later than 45 days prior to the license icenses are annual; a new license and fee is required every fee of \$150.00 for resubmission required.	
This is a(n)	Initial Application Pr	reviously Licensed Annual Application	
RENTAL PROPERTY	NUMBER/STREET:		
Maximum No. of Bedro	oms Minimum	No. of Off-street Parking Stalls	
	O:	rporation, trust, etc. shown on Property Deed)	
PRIMARY CONTACT	NAME:		
MAILING ADDRESS:			
	ust provide contact information and sig	n this application. Use additional space provided	
LOCAL RESIDENT AC	GENT (within 30 miles):		
AGENT MAILING AD	DRESS:		
PHONE:	EMAIL:		
APPLICATIONS SH	IALL INCLUDE.		
		cense Application Form signed by all owners in title	
\square A floor plan of the α	-	ndicating the sleeping areas available for rent and	
-	ng where parking is available onsite; of parking stalls available to guests	where the driveway is located; driveway width; and	
the other party sharing	• \ 1	Shared driveway, provide a signed agreement from owledge the shared driveway will be used by short-	
	Il four sides of the exterior of the burty towards the dwelling	ilding and one photo at the end of the driveway	
\square Copy of the most re	cent recorded deed to the property		
☐ Registered Agent St	tatement or Contract for Services		
Current copy of the DCTZC permit			

☐ If served by a private well or POWTS, well and sanitation reports as required ☐ Proof of a contract for refuse and recycling collection and disposal services ☐ If in an R-2 District, verification by Development Agreement or Homeowner's Association/Condominium ☐ Bylaws which authorize short-term rentals ☐ Copy of the Property Rules (see below) ☐ The required non-refundable application fee
 A copy of the State of Wisconsin tourist rooming house license, Door County Tourism Zone Good Neighbor Policy, and the Village STR license shall be posted on the property. Property Rules must include, at minimum, the following components: The name and phone number of the Operator or Resident Agent. A diagram of the property identifying the property lines and the location of off-street parking, including the maximum number of off-street parking spaces provided for renters, and where located, prohibited vehicles and parking areas, including a statement that no parking is allowed on the grass, no campers are allowed, and no boats can be parked onsite more than 24 hours. Quiet hours of 10PM to 10AM. Pet policy in compliance with, at a minimum, Chapter 10 of the Village of Sister Bay Municipal Code. Information about refuse and recycling storage and collection that demonstrates compliance with Chapter 50 of the Village of Sister Bay Municipal Code. Fireworks are strictly prohibited. Outdoor burning regulations, including where to check to see if a burn ban is in effect. Information specific to the property about tornado safety, operation of the fire and carbon monoxide alarms, where to locate a fire extinguisher and location of all hoses for extinguishing. Notification that, in an attempt to stop the spread of invasive species, the renter and their guests are prohibited from transporting firewood not harvested in Door County. No firearms are allowed on the property. No firearms are allowed on the property. Notification that the Operator may be cited or fined by the Village or have their license revoked if the renter violates any provisions of the Village of Sister Bay Municipal Code.
Certification Statement: I certify that I have read and am familiar with the municipality's Short-Term Rental licensing rules, Zoning Code and other sections of the Municipal Code that are applicable to my property, and the short-term rental thereof, and I am the titled owner of the property that is the subject of this License Application. I certify that the information contained in this form and the attachments are true, accurate and complete. I agree to comply with all applicable State, County and Municipal Codes, statutes and ordinances and with the conditions of the License. I acknowledge that I have read and understood the use and development restrictions on the property deed, condominium bylaws, or homeowner association, if applicable, and am in compliance with said restrictions. I understand that the issuance of the License creates no legal liability expressed or implied on the municipality. Proof of the License and Property Rules shall be posted in a conspicuous location at all times while the property is rented. I have read and am familiar with the municipality's Short-Term Rental licensing rules and I understand that failure to comply with any and all provisions of the License may result in license suspension, revocation, non-renewal, and penalties. I understand that no person shall operate or continue to operate a Short-Term Rental without first obtaining a License.
Owner Signature: Date: Printed Name:

Owner Signature:	Date:
Printed Name:	
Owner Signature:	Date:
Printed Name:	
Owner Signature:	Date:
Printed Name:	

Signed and completed applications, including all addendums, can be scanned and sent as one pdf document to the Village Clerk at the following address: clerk@sisterbaywi.gov

You may also mail the completed application to the Village Administration Office at:

Village of Sister Bay PO BOX 769 Sister Bay, WI 54234

Payment should be made by check, made payable to *Village of Sister Bay*. There is no option to pay by direct debit or credit card at this time.