

# **CITY OF VICTOR**

## P. O. Box 86, Victor, CO 80860 719-689-2284

APPLICATION MUST BE COMPLETED IN FULL EVEN IF A RENEWAL-INCOMPLETE APPLICATIONS WILL BE RETURNED.

\*\*Renewals are Due by Jan 1 of each year\*\*

Fees are due when filing this application with the Clerk's Department. Full fees are due regardless of when the application is filed.

Licenses expire every other year on December 31st starting December 31st 2021.

[ ] New License (Residential Zone)	
[ ] Renewal License (Residential Zone)	
[ ] New License (Commercial Zone)	
[ ] Renewal License (Commercial Zone)	
[ ] Compliance Inspection (following written co	omplaint)
Applicant/ Property Owner	
Name:	
Mailing Address:	
Phone Number: E	Email Address:
Owner's Agent (required if licensee is not able t	to respond to property within 20 minutes)
Name:	
Mailing Address:	
Phone Number:	Email Address:

### **Short-Term Rental Information**

Physical address of propo	osed short-term rental:	
Unit # 7	Zoning district:	
What structure type will t	the short-term rental be in?	
[ ] single-family house	[ ] duplex [ ] multi-	family building
[ ] accessory dwelling uni	it [] mixed-use building	
Is the short-term rental tenants?	in a multi-family building that also has long-term	Yes[] No[]
If yes, have you	notified the long-term tenants of the proposed STR?	Yes[] No[]
Is the short-term rental	within a <b>duplex</b> ?	Yes[] No[]
Are both units o	Yes[] No[]	
Is one unit occupied by the owner?		Yes[] No[]
Have you notifie	ed long-term tenants of the proposed STR?	Yes[] No[]
Is the short-term rental	in an accessory dwelling unit?	Yes [] No []
If yes,		
Does the ADU has the Municipal Co	ave separate taps for water/wastewater as required by ode?	Yes [] No []
Does the dwelling unit h 10 people over the age of	nave less than 5 bedrooms or accommodate fewer than of 18?	n Yes[] No[]
	2 off-street parking spaces plus additional spaces late any tenant vehicles off street?	Yes [] No []
	e adequate trash containers and information on for the short-term rental unit?	Yes [] No []
	vner's Agent be available within 20 minutes to manage periods the unit is rented?	Yes [] No [] N/A []
Did you notify your neig term rental? <b>Provide Pro</b>	hbors that you intend to use your property as a short- pof and List Responses.	Yes [ ] No [ ] N/A [ ]

#### AFFIRMATION BY PROPERTY OWNER

I understand that I am required to remit all applicable sales taxes monthly to the State of Colorado Department of Revenue.				
	owner initials			
I understand that all advertisement associated with this short-term re license number issued with the approved permit.	ntal will prominently display any owner initials			
I understand the City of Victor will inspect the Short-Term Rental prior subsequent renewals and upon legitimate written complaints.	to the approval of this license, for any			
	owner initials			
I understand that I am required to comply with Ordinance NO. 509 o well as all other regulations set forth in the City of Victor Municipal Co				
I, the owner/representative of the property I affirm that I will address, impacts to the neighborhood, caused by the STR, including offensive n management/disposal?				
I understand that any violations are subject to enforcement action including revocation of my short-term rental license, sales tax license and any other applicable provisions for enforcement.				
	owner initials			
I understand that I am required to notify the City of Victor if I choose rental and choose to release my license.	e to no longer operate my short-term owner initials			
	<del></del>			
I understand that I must maintain liability insurance on the Short-Term of this property.	mental specific to protect the lessees  owner initials			
I understand the City of Victor, Colorado accepts no legal liability in connection with the approval and subsequent operation of the applied for short-term rental. I hereby release the City of Victor, Colorado, its employees, representatives, agents and elected or appointed officials from any and all liability in connection with the proposed approval and subsequent operation of the applied for short-term rental.				
	owner initials			
APPLICATION HAS BEEN EXAMINED BY ME; THAT ALL OF THE APPLICATION AND ALL ATTACHMENTS ARE TRUE, CORRECT AND KNOWLEDGE AND BELIEF. I AM AWARE OF, AND FULLY UNDERSTAN REGARDING SHORT-TERM RENTALS.	COMPLETE TO THE BEST OF MY			
Property Owner's Signature:	Date:			
Property Owner's Signature:  Please note: Applicant has 14-days after being notified by the City information or documents, to submit the requested information. Failurequired timeframe will cause the application to be denied.	Date: of missing or incomplete application ure to provide this information within			

### Additional Documents to be Submitted with Application

Application for sales tax license, or copy of existing sales tax license.					
<ul> <li>Copy of recorded deed to premises, executed lease for the premise or other possession evidence.</li> <li>Proof of liability insurance specific to the Short-Term Rental</li> </ul>					
City of Victor Business	s License Applicat	tion and Fee (to be issue	ed if approved)		
	City of Victo	or Staff USE ONLY			
Date & Time Application Received:		By:			
Payment Date:	Amount Received:		By:		
Tap Fees Due:	Amount Received:		By:		
STR Premises Inspected by on,					
Address of Nearest Short-Term Rental					
[] STR License Approved, Dat					
[] STR License Denied, Date:		-			
STR License No:		Town Sales Tax No: _			
Notes:					