



Application for Short Term Rental Business License

This license is required for short term rentals within the Town of Minturn.

Ord 04 – Series 2017 | MMC 6-7-10 to 6-7-80(c)

April 1, 20__ to March 31, 20__

PROPERTY OWNER INFORMATION

OWNER NAME		SECONDARY OWNER NAME	
OWNER STREET ADDRESS (INCLUDE CITY, STATE & ZIP)		SECONDARY OWNER STREET ADDRESS (INCLUDE CITY, STATE & ZIP)	
OWNER MAILING ADDRESS (INCLUDE CITY, STATE & ZIP)		SECONDARY OWNER MAILING ADDRESS (INCLUDE CITY, STATE & ZIP)	
OWNER PHONE	OWNER EMAIL	SECONDARY OWNER PHONE	SECONDARY OWNER EMAIL

PROPERTY MANAGEMENT CONTACT INFORMATION (must be physically within 50 road miles of Minturn)

MANAGEMENT COMPANY NAME (IF APPLICABLE)	PRIMARY MANAGEMENT REPRESENTATIVE
MANAGEMENT STREET ADDRESS (INCLUDE CITY, STATE & ZIP)	MANAGEMENT MAILING ADDRESS (INCLUDE CITY, STATE & ZIP)
PROPERTY MANAGEMENT PHONE	PROPERTY MANAGEMENT EMAIL

PROPERTY INFORMATION

PHYSICAL ADDRESS		
# ON-SITE PARKING SPACES	# BEDROOMS	
YEAR PROPERTY PURCHASED BY APPLICANT	MAX OCCUPANCY (3PPL/BDRM)	ADVERTISED OCCUPANCY

ANNUAL ITEMS TO INCLUDE WITH APPLICATION

- Proof of 2-year ownership (closing statement)
- Code Compliance & Safety Inspection¹
(Call 970-827-5645 x4)
- Copy of Colorado Sales Tax License
- \$300.00 STR License Fee

¹ Reference Article 16 of the Minturn Municipal Code for complete details.

APPLICANT SIGNATURE

I declare under penalty of perjury in the second degree that the statements made in the above application are true and complete to the best of my knowledge.	
_____	_____
Authorized Signature	Date

Please print and mail with payment to: Town of Minturn, Attn: Deputy Clerk, PO Box 309, Minturn, CO 81645. Questions: 970-827-5645 x2

PAY BY CREDIT CARD:

FOR OFFICE USE ONLY

NAME ON CARD	DATE PAID	FEE PAID
CARD # (VISA OR MC)	DATE ENTERED	LICENSE #
EXP DATE CVC	DEPUTY CLERK SIGNATURE	

Short Term Rental means any residential property dwelling unity or portion thereof rented for a period of less than thirty (30) consecutive days. Rentals of entire dwelling units, individual rooms, or portions of rooms shall each be considered Short-Term Rentals. MMC 6-7-20

Town of Minturn
P.O. Box 309 ♦ 302 Pine Street
Minturn, CO 81645



Kathy Biggs, Code Compliance Officer
970-827-5645 ext. 4
Email: code@minturn.org

Code Compliance & Safety Inspection Checklist for Short Term Rentals April 1, 2017 to March 31, 2018

Owner Name(s): _____

Owner Mailing Address: _____

Short Term Rental Address: _____

Owner Phone: _____ E-mail: _____

- | | |
|---|---|
| 1) Copy of Assessors Report
of bedrooms per tax assessors _____
of bedrooms advertised on STR site _____ | _____
Code Compliance
initials for approval |
| 2) Parking requirements met
of on-site parking spaces per submitted site plan _____
STR website _____ | _____
Code Compliance
initials for approval |
| 3) 911 address Information and contact next to front door | _____
Code Compliance
initials for approval |
| 4) Working Fire Extinguisher* at front door under 911 information
<i>(Minimum 5lbs. ABC)</i> | _____
Code Compliance
initials for approval |
| 5) Smoke/Fire Alarm System* working (In each bedroom) | _____
Code Compliance
initials for approval |
| 6) CO System* working (outside bedrooms – within 15') | _____
Code Compliance
initials for approval |

Code Compliance Officer Comments: _____

Kathy Biggs
Code Compliance Officer

_____ Date

Property Owner Signature
*I take full responsibility to maintain and test safety equipment

_____ Date

REFERENCING CODES:

Sec. 6-7-40 – License restrictions.

(c) Number of inhabitants. No more than three (3) people per bedroom, including children, shall be permitted to occupy a Short-Term Rental.

Sec. 16-16-20. - Parking required for residential and lodging uses.

MINIMUM OFF-STREET PARKING REQUIRED FOR RESIDENTIAL & LODGING USES

Single-family and duplex	2 spaces per dwelling unit for up to 3 bedrooms 3 spaces for 4 bedrooms and 1 space per each additional bedroom after 4 bedrooms on-site parking
Accessory apartment or dwelling unit	1 space per unit