



**City of Whitefish
Planning Department**
PO Box 158
418 E 2nd Street
Whitefish, MT 59937
Phone:
406-863-2410

SHORT-TERM RENTAL PERMIT AND BUSINESS LICENSE APPLICATION

FEE ATTACHED: _____ [\$100 application fee + business license fee (\$100 + \$50 per unit)] **Business License #** _____

I (we), the undersigned, hereby make application to conduct a residential short-term rental (30 days or less) in the Whitefish City limits consistent with Section 11-3-35, Short Term Rental Standards:

Property Owner/Business Name:	Phone:
Rental Physical Address:	Zoning District:
Owner Mailing Address:	
City, State, Zip:	
Email Address:	
Property Mgmt Co./Local Contact:	Phone:
Manager Mailing Address:	
Email Address:	
Estimated months of rental (i.e. Yearly or Jan-May):	
Who is reporting the Resort Tax?	

The following items are required for approval of the Short-Term Rental:

- A "to scale" site plan showing lot, residence and accessory buildings, adjacent streets, and the location of required 9' x 20' off-street parking spaces.
- Proof of application for a State of Montana Public Accommodation License for a Tourist Home administered by the Flathead City-County Health Department and subject to annual inspections. For more information: 406-751-8130 or <http://flatheadhealth.org/environmental-health/public-accomodations/> click on 'Plan Review Application'. A copy of the final sign-off shall be submitted to the Planning Office.
- Name and phone number of local contact person if owner is not a full-time resident of the Flathead Valley.
Local Contact Name: _____ Phone Number: _____
- Number of Short Term Rental Units _____

I understand the following criteria apply to my business (initial next to each standard that is met):

- _____ The dwelling in question must conform to the land use provisions of Title 11, Zoning, and other applicable regulations.
- _____ Units rented shall not exceed the allowable dwelling unit density of the underlying zoning district. A unit is defined as an entire privately owned house, townhouse, condo, apartment or other residence, or any space within a dwelling unit rented independently, for stays of less than 30 days.
- _____ Each unit shall meet the standards for off-street parking found in Section 11-6 of the zoning regulations. With the exception of the WB-3 zone, that standard is two parking spaces per unit.
- _____ The owner's (or local contact, if absentee) contact name and phone number shall be posted on an emergency contact notice visible outside the front door of each unit.
- _____ The owner shall keep the property and buildings maintained and continue to provide trash collection services.

_____ Exterior signage advertising the short-term rental of properties is not permitted.

_____ The property owner shall understand that a violation of any of these conditions as well as repeated complaints of *disturbing the peace* related to this property may result in suspension and possible revocation of the business license and short-term rental permit, as well as possible enforcement action.

_____ The Whitefish Fire Marshal will contact the owner (or local contact) to set up an inspection to determine if the dwelling meets current safety standards.

_____ I have received a copy of the Whitefish Fire Department Rental Checklist with the Short-Term Rental Application.

_____ I understand I will be charged a re-inspection fee of \$50.00 if the Whitefish Fire Marshal is required to inspect the property a second time due to a failed inspection.

_____ I understand the dwelling will be inspected annually (every 12 months) by the Whitefish Fire Marshal, who will contact the owner (or local contact) to set up the inspection to be scheduled upon renewal of the business license.

_____ I understand I am required to report and remit Resort Tax on a monthly basis pursuant to Title 3 Chapter 3 of the Whitefish City Code.

_____ If applicable, I understand that due to the change of use, my property will be assessed for payment under Special Improvement District 167 for the City of Whitefish Parking Structure.

I agree to operate the short-term rental in full compliance with Whitefish zoning regulations and Section 11-3-35, Short Term Rentals. I further certify the information given is correct to the best of my knowledge.

_____ Property Owner Signature

_____ Date

----- For City Staff Use Only -----

Filing Date: _____ Amount Paid: _____ Receipt #: _____

SECTION 11-3-35 MET: YES NO

Parking/Site Plan approved Yes _____ No _____ If no, reason: _____

Located in SID 167: Yes _____ No _____

Fire Marshal Inspection Pass _____ Fail _____ If fail, reason: _____

Fire Marshal Signature: _____ Date: _____

Building Department Signature: _____ Date: _____

Planning Department Signature: _____ Date: _____

Short Term Rental Permit Disposition:

Approved _____ Denied _____ If denied, reason: _____

Reviewer: _____ Date: _____

Business License Disposition:

Approved _____ Denied _____ License No: _____ If denied, reason: _____

Reviewer: _____ Date: _____