Conditional Use Permit (CUP)																										
SAINT L			Short Term Rental										Permit #													
APPLICATION St. Louis Coun																										
	About: This application is used to apply for a Short Term Rental Permit. Applicants will need to attach all required worksheets, information and attachments in order to process. For more information, see our website at: http://www.stlouiscountymn.gov/land-use																									
PROPERTY IDENTIFICATION NUMBER (PIN) PIN is found on your Property Tax Statement																										
Primary PIN Structure/SSTS						Associated PIN	d			-				-	-											
Associate PIN				-				-					Associated PIN				-				-					
	E.g. 123-1234-12345. Primary PIN: Parcel where Structure/SSTS are located. Associated PIN: Additional and/or adjacent property that you own or that is related to the project. County Land Explorer: https://gis.stlouiscountymn.gov/landexplorer/ Property Lookup: <a h<="" td="">																									
APPLI	CAN	T													1											
Applicant	Applicant Name (Last, First) I am a Permittee/Operator Homeowner Other Daytime # Date																									
Applicant	t Addı	ress													City			S	State			ZI	Р			
Applicant	t Ema	il																								
Contact	Persoi	n											Contact Per	son #	ŧ											
Mailing Address (Where to Send Permit) City State ZIP																										
Email Ad	ldress	(Whe	ere to Ei	mail Pe	ermit)																					
SITE I	NFO	RM	ATIO	N																						
🗌 Yes		١o	Is the	ere a	site	addi	ress fo	or th	is pro	oper	ty? (If no,	the applicatio	n will	be forv	varde	ed to 9	11/0	Comm	unica	tion	s to as	ssign	one.)		
If yes ab	ove, p	pleas	e list	site a	addre	ess:																				
🗌 Yes		١o	Is thi	is lea	sed	prop	erty?	If ye	s, lea	ased	fror	n: 🗆 I	MN Power 🔲 N	1N DNF	ι 🗆 υ	IS For	est Serv	vice	□ s	t Loui	ε Coι	unty	🗌 Ot	her		
🗌 Yes		١o	Do yo	Do you have written authorization from the leased property owner? If yes, you must attach written authorization form.								m.														
How is the property accessed? Public Road Private Road Easement Water Other																										
(If accessed by easement, easement documentation must be attached.)																										
TYPE OF APPLICATION PLEASE MAKE CHECKS TO: ST. LOUIS COUNTY AUDITOR Conditional Use Permit: Short Term Rental - \$650 Conditional Use Permit Rehearing: Short Term Rental - \$210																										
AGREEMENT																										
By submitting this application, I certify and agree that I am the owner or the authorized agent of the owner of the above property, and that all uses will conform to the provisions of St. Louis County. I further certify and agree that I will comply with all conditions imposed in connection with the approval of the application. Applicants may be required to submit additional property descriptions, property surveys, site plans, building plans and other information before the application is accepted or approved. <i>Intentional or unintentional falsification of this application or any attachments thereto will make the application, any approval of the application, any approval of the application, and any resulting permit invalid.</i> I authorize St. Louis County staff to inspect the property to review the application and for compliance inspections. Furthermore, by submitting this application, I release St. Louis County and its employees from any and all liability and claims for damages to person or property in any manner or form that may arise from the approval of the application, any related plans, the issuance of any resulting permit or the subsequent location, construction, alteration, repair, extension, operation or maintenance of the subject matter of the application.																										
CONTA	CT: P	Plan	ning	and	Cor	nmı	unity	Dev	velo	pm	ent	Depa	artment													
						luth	ont C	nico	c Co-	tor		Virgi		oc Co-					ce Use Only							
Toll Free: Land Use	Inform	nation			320	Wes	nent Se st 2 nd S	treet,				201 5	rnment Service South 3 rd Aven	ue We				Receipt #								
						10) 740 7102				Receipt Date Payment Amount																



Conditional Use - Short Term Rental

WORKSHEET St. Louis County, Minnesota

PERMI	Т ТҮРЕ									
]	Short Term Rental Permit (Requires Conditional Use Approval)								
SHORT	TERM	RENTAL								
🗌 Yes	🗌 No	Is the property located in one of the following zone districts: Commercial or Sensitive ?								
🗌 Yes	🗌 No	Is the property located in Residential zone district? If yes, additional standards apply. (See fact sheet for additional standards)								
🗌 Yes	🗌 No	Is there more than one rental dwelling unit on the same parcel or single units on contiguous parcels under common ownership?								
If yes, h	ow may i	rental dwelling units?								
🗌 Yes	🗌 No	Do you currently reside at this property?								
☐ Yes	Is the property used primarily for rental purposes? If yes, shall be deemed a Commercial Use-Class II as a Commercial Short Term Rental and subject to ordinance requirements.									
Please d	Please describe the proposed use. (List all structures included with the proposed use)									
OCCUP	ANCY I	NFORMATION								
		Total # of bedrooms on the property								
		Total # of allowed guests								
DESCR	IPTION	OF YEARLY USE* (Total number of days must equal 365)								
		Intended # of days for personal use								
	Intended # of days for rental use									
	Intended # of days unused									
*Primary use of the property for short term rental purposes may affect your property tax classification. Please contact your County Assessor for more information. <u>https://www.stlouiscountymn.gov/departments-a-z/assessor</u>										
TRAFF	TRAFFIC, PARKING, AND/OR DOCKAGE									
🗌 Yes	🗌 No	Will the proposal generate an increase in traffic? (Boat, snowmobile, truck, bus, car, etc.)								
If Yes, h	ow many	parking spaces are available on the property? (Please attach on-site parking plan)								

SIGNAGE AND LIGHTING											
🗌 Yes	🗌 No	Does your proposal include signage? (Include any off-site signs)									
If Yes, p	If Yes, please list number of signs, size, location, and illumination of each sign:										
	1										
🗌 Yes											
If Yes, p	lease expl	ain:									
REQUI		STINGS									
REQUIRED POSTINGS											
🗌 Yes	YesNoHave applicable licenses, rules and regulations and emergency contact information for police, fire, hospital, septic tank pumper, and permittee/owner/operator been posted in a prominent location within the rental unit? (Please attach copies)										
If No, pl	ease expla	in:									
🗌 Yes	🗌 No	Have Aquatic Invasive Species (AIS) prevention guidelines been posted for watercraft use? (Please attach copy)									
If No, pl	ease expla	in:									
		TREATMENT									
		ill be generated?									
□ Yes □ No											
	vhat type o te Septic S	of system will be used to handle wastewater treatment?									
		ysem									
🗌 Othei	□ Other, please explain:										
SOLID WASTE Check all types of waste generated and describe how you will collect and store waste generated from the Short Term Rental below:											
🗌 Hous	ehold Gart	Dage 🗌 Animal Waste 🗌 Other									
If Other	, please ex	xplain:									
Please d	Please describe collection and disposal:										
SCREENING											
What ty	pe of visua	al screening will be used:									
From Ro	ads	From Adjacent Properties From Lakeshore (if applicable)									
🗌 Vege	tative	Fence Other Vegetative Fence Other Fence Other									
Please D	escribe:										

AUTHO	ORIZINO	GAGENCIES									
🗌 Yes	🗌 No	Have you received a Lodging License from the Minnesota Department of Health for this Short Term Rental? If Yes, please attach copy.									
☐ Yes	□ No	Have you received a Minnesota Tax Identification Number from the Minnesota Department of Revenue for this Short Term Rental? (Please attach copy) If No, your application will be returned.									
ADDIT	IONAL	REQUIRED INFORMATION & ATTACHMENTS									
1.	Electroni	c Map or Sketch:									
	Boundary lines with parcel dimensions.										
	Existing Buildings. (see site sketch form for required information)										
	If located in a RES zone district, property lines shall be located by a licensed land surveyor OR a written agreement between the adjoining property owners and the short term rental permittee/owner/operator may be submitted and filed with the Department.										
2.	2. Documents:										
	Copy of a septic permit to construct or certificate of compliance approval or municipal/sanitary district approval.										
	Minnesota tax identification number and other applicable identification numbers.										
	Proof of appropriate liability insurance.										
	On-site parking plan.										
	Current o	contact information for person(s) responsible for property management.									
	Photo do	cumentation of visual demarcation of the property lines.									
	Evidence	of ownership.									
	Other inf	ormation as deemed necessary by the Director.									
CONTA	CT: Plan	ning and Community Development Department									

Technical Assistance Toll Free: 1-800-450-9777 Land Use Information www.stlouiscountymn.gov/landuse Duluth Government Services Center 320 West 2nd Street, Suite 301 Duluth, MN 55802 (218) 725-5000 **Virginia** Government Services Center 201 South 3rd Avenue West Virginia, MN 55792 (218) 749-7103

Office Use Only

Receipt #	
Receipt Date	
Payment Amount	
Paid By	



EMERGENCY CONTACT INFORMATION

Short Term Rental St. Louis County, Minnesota

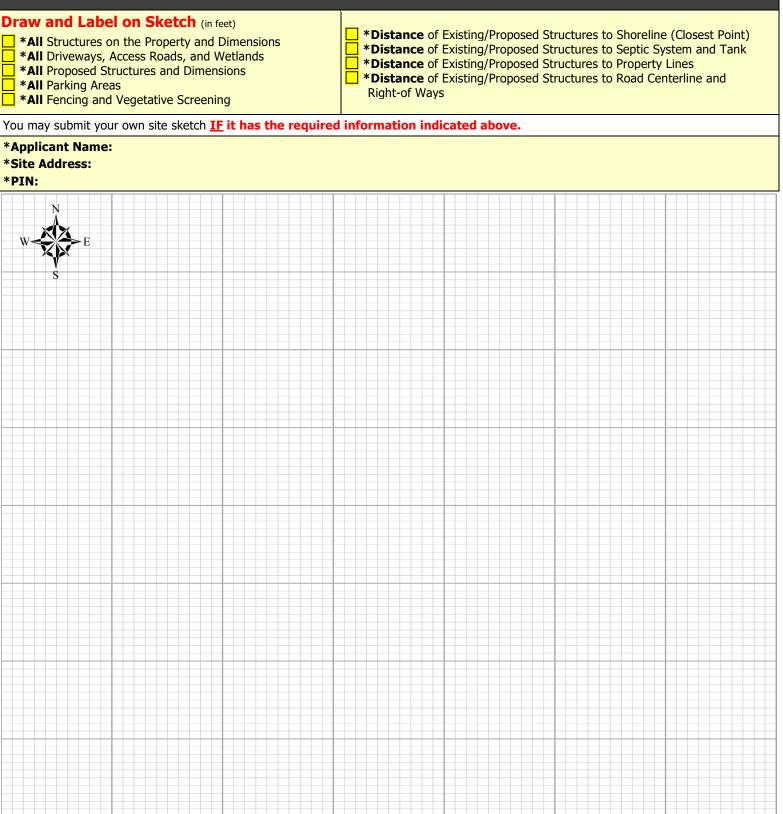
About: The permittee/owner/operator shall post within the rental unit the rules and regulations and emergency contact information for police, fire, hospital, septic tank pumper, and permittee/owner/operator.

APPLICANT				
Name				
		City	Chatta	710
Address		City	State	ZIP
Email		1		1
Contact Person	Contact Persor	1 #		
Contact Person Email	1			
PROPERTY MANAGEMENT/LOCAL CONTACT				
Name				
Address		City	ZIP	
Email				
Contact Person	Contact Persor	1 #		
Contact Person Email	1			
POLICE				
Station Name				
Address		City	ZIP	
Non-Emergency #	Emergency #	I		
FIRE	1			
Station Name				
Address		City	ZIP	
Non-Emergency #	Emergency #	1		

HOSPITAL								
Name								
Address			City		ZIP			
Contact #								
SEPTIC TANK PUMPER								
Name								
Address		City			ZIP			
Email								
Contact Person		Contact Person #						
Contact Person Email								
CONTACT: Planning and Com	munity Development Department							
Technical Assistance Toll Free: 1-800-450-9777 Land Use Information www.stlouiscountymn.gov/landuse	Virginia Government Services Center 201 South 3 rd Avenue West Virginia, MN 55792 (218) 749-7103		Office Use Only Receipt # Receipt Date Payment Amount					

Paid By _____

Site Sketch Form The sketch is to graphically illustrate your proposed project(s)



Sanitary Authority Use Only							
es 🗆 No							
<u> </u>							
e							

St. Louis County, Minnesota