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| **Interim Use Permit (IUP)**  **Short Term Vacation Rental** **Application**  Windemere Township, Pine County, MN  Permit # | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **About**: This application is used to apply for a Short Term Vacation Rental Permit. Applicants will need to attach all required worksheets, information and attachments in order to complete the process. For more information, see our website at: http://www.windemeretownship | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **PROPERTY IDENTIFICATION NUMBER (PIN)** *PIN is found on your Property Tax Statement* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Primary PIN Structure/SSTS | | |  |  | | |  | **-** |  |  | |  |  | **-** | |  |  |  |  |  | | Associated PIN |  | |  | |  | **-** |  | |  |  |  | **-** |  |  |  |  |  | |
| Associated 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: www.co.pine.mn.us/beacon Property Lookup: www.co.pine.mn.us/beacon | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **APPLICANT** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Applicant Name (Last, First) I am a...  Permittee/Operator  Homeowner  Other | | | | | | | | | | | | | | | | | | | | | | | | Daytime # | | | | | | | | | | | Date | | | | | |
| Applicant Address | | | | | | | | | | | | | | | | | | | | | | | | City | | | | | | State | | | | | ZIP | | | | | |
| Applicant Email | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| Contact Person | | | | | | | | | | | | | | | | | | | | | Contact Person # | | | | | | | | |  | | | | | | | | | | |
| Mailing Address (Where to Send Permit) | | | | | | | | | | | | | | | | | | | | | | | | City | | | | | | State | | | | | ZIP | | | | | |
| Email Address (Where to Email Permit) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **SITE INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | No | | | | Is there a site address for this property? (If no, the application will be forwarded to 911/Communications to assign one.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If yes above, please list site address: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | No | | | | Is this leased property? If yes, leased from:  MN Power  MN DNR  US Forest Service  Pine County  Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | No | | | | Do you have written authorization from the leased property owner? If yes, you must attach written authorization form. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| How is the property accessed?  Public Road  Private Road  Easement  Water  Other  (If accessed by easement, easement documentation must be attached.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **permit Application fee PLEASE MAKE CHECKS TO: WINDEMERE TOWNSHIP** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Interim Use Permit: Short Term Rental - **$1,500 for 3 years. Of that amount, $500 is non-refundable.** The fee may  be paid as $500 per year for three years. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **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 Windemere Township. 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. ***Intentional or unintentional falsification of this application or any attachments thereto will make the application, any approval of the application and any resulting permit invalid.*** I authorize Windemere Township staff to inspect the property to review the application and for compliance inspections. Furthermore, by submitting this application, I release Windemere Township 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 or 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. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **SHORT TERM RENTAL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | No | | Is the property located in one of the following zone districts: **Commercial or Special Protection District**?  If yes, an Interim Use Permit Application is required. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | No | | Is the property located in a **Residential or Rural Residential** zone district?  If yes, an Interim Use Permit Application is required. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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, each additional unit is subject to ordinance requirements for proposed use and an Interim Use Permit Application may be required. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | No | | Do you currently reside at this property? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | No | | Is the property used primarily for rental purposes?  If yes, shall be deemed a Commercial Use and subject to ordinance requirements regarding commercial use. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| How is this lot currently being used? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please describe the proposed use. (List all structures included with the proposed use) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **OCCUPANCY INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | Total # of bedrooms on the property | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | Total # of allowed guests | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **DESCRIPTION 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.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **TRAFFIC, PARKING, AND/OR DOCKAGE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | No | | | | Will the proposal generate an increase in traffic? (Boat, snowmobile, truck, bus, car, etc.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If Yes, how 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) Windemere Township supports Dark Night Skies | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If Yes, please list number of signs, size, location, and illumination, if any, of each sign: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | No | | | | Will there be lighting (including security lighting) that may be visible from roads, waterways, and adjacent properties? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If Yes, please explain: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **REQUIRED POSTINGS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | No | | | | Have 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, please explain: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | No | | | | Have Aquatic Invasive Species (AIS) prevention guidelines been posted for watercraft use? (Please attach copy) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If No, please explain: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **WASTEWATER TREATMENT** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Will wastewater be generated?  Yes  No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If Yes, what type of system will be used to handle wastewater treatment?  Private Septic System  Holding Tank  Municipal  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:* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Household Garbage | | | | | | | | | | | | | | | Animal Waste | | | | | | | | | | | Other | | | | | | | | | | | | | |
| If Other, please explain: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please describe collection and disposal: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **SCREENING** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| What type of visual screening will be used:  From Roads From Adjacent Properties From Lakeshore (if applicable)  Vegetative  Fence  Other  Vegetative  Fence  Other  Vegetative  Fence  Other  Please Describe: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ADDITIONAL REQUIRED INFORMATION & ATTACHMENTS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Electronic Map or Sketch: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Boundary lines with parcel dimensions. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Existing Buildings | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If located in a Residential zone district, property lines shall be located by a licensed land surveyor. **and filed** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Documents: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Copy of a septic permit to construct or certificate of compliance approval or municipal/sanitary district approval. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| On-site parking plan. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Current contact information for person(s) responsible for property management. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Photo documentation of visual demarcation of the property lines. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Evidence of ownership. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other information as deemed necessary by the Windemere Township Zoning Administrator. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **CONTACT:** WINDEMERE TOWNSHIP ZONING ADMINISTRATOR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Office Use Only**  Receipt #  Receipt Date  Payment Amount  Paid By  Permit Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | |