



Town of Preston SHORT TERM RENTALS

Zoning Permit App # _____ Date Submitted _____ Amount Paid \$ _____ Check # _____

Zoning Permit Applications that need Planning and Zoning Commission Approval:
Section 16 of the Zoning Regulations, 16.19 Short-term Rental Requirements

Your application shall include a basic Zoning Permit application (this page), supplemental information, and signature page.

Please fill out this application completely. If the application is not properly completed with documentation submitted, as noted below, it will create unnecessary delays. Provide 8 copies of the plan with the application attached. In addition, provide the following:

- ___1. Fee of \$260.00 (\$200.00 Town application fee and \$60.00 State fee).
- ___2. Site/Plot Plan at an appropriate scale.
- ___3. Elevation drawings and floor plans of any proposed structures.
- ___4. Letter from the Department of Transportation for work within a state highway right-of-way, as applicable.
- ___5. Copy of property deed on file in the Town Clerk’s Office.
- ___6. Copies of approval letters from all applicable agencies, i.e., IWWC or ZBA as applicable.

ALL APPLICATIONS REQUIRE A LEGAL NOTICE TO APPEAR IN THE PAPER AFTER THE COMMISSION TAKES ACTION. PLEASE NOTE THAT A PERMIT WILL NOT BE VALID UNTIL THE LEGAL NOTICE FEE IS PAID. THE AMOUNT OWED WILL BE NOTED IN YOUR FINAL ACTION LETTER FROM THE COMMISSION.

Name of applicant _____

Telephone () _____ Cell Phone () _____

Address of applicant _____ Email _____

Location of subject property _____

Owner of Property _____

Telephone () _____ Cell Phone () _____

Address of property owner _____ Email _____

1. Please provide a description of the project, including site improvements, drainage improvements, buildings and uses. Please use additional sheets as necessary.

1. What is the square footage of the structure? _____
2. Please list the number of bedrooms and all areas that there will be additional sleeping/beds available. Also show on the floor plans.

3. Will there be on-site trash and recycling? Please show the location on the plot plan. Please note the schedule for trash removal. The property shall be properly maintained.

4. Has the septic and well been reviewed and approved by the Uncas Health District for the Short-Term Rental use? Yes _____ No _____
5. Please provide 24-hour contact person in the event there are any concerns with the STR operation.
Name: _____
Address _____
Home Phone: _____ Cell: _____
Email address: _____
6. Note the Number of Parking Spaces and location – show on the plot plan _____
7. What are the sight distances for the driveway in both directions? _____
8. Please provide a copy of the notarized letter indicating compliance with all the STR regulations. Form is attached.
9. An annual renewal permit will be submitted in accordance with Section 16.19.2 of these Regulations – please initial: _____
10. The ZEO or an agent thereof (such as the Resident Trooper or Town Planner) has the right to inspect the property at any time. A 24-hour notice will be provided unless for complaint of a neighborhood disturbance please initial: _____
11. In the event there is a concern with the Short-Term Rental, at the request of the Zoning Enforcement Officer, you agree to cease rental of the property until the matter is resolved to the Zoning Enforcement Officer's satisfaction. Please initial _____



Town of Preston
Application Signatures
And
Permission to Access the Site

All owners of the property must sign the application, unless the property is owned by a corporation, in which case a corporation is authorizing its signature to execute any documents required to be submitted with the application. By signing this application, permission is hereby granted by all owners of the property to file the attached application and authorizes Town of Preston representatives to enter onto the property at any time during the application process or during construction of the project for inspections, and for any other appropriate purposes.

Permits are not transferable unless the new property owner files all required permit transfer documents and/or applications, which are available from the Town Planner.

Applicant _____ **Date** _____

Print name _____

Owner _____ **Date** _____

Print name _____

Owner _____ **Date** _____

Print name _____

FOR TOWN USE:	
Date of Receipt by the PZC _____	Request for Extension(s) date _____
Referral Date to Town Staff _____	
<p>Departments</p> <p><input type="checkbox"/> Building Inspector</p> <p><input type="checkbox"/> Fire Marshal</p> <p><input type="checkbox"/> Zoning Enforcement Officer</p> <p><input type="checkbox"/> Uncas Health District</p> <p><input type="checkbox"/> IWWC</p> <p><input type="checkbox"/> CAC</p> <p><input type="checkbox"/> First Selectman</p> <p><input type="checkbox"/> Other _____</p>	<p>Date comments are received:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

Short-Term Rental Agreement Applicant/Owner

To the Preston Planning and Zoning Commission:

As the owner/applicant of the Short-Term Rental, I/we agree to the following requirements outlined in Section 16.19 of the Zoning Regulations:

1. As the owner and applicant (I or we) agree to limiting stay at the property to three (3) weeks in a three-month period by the same party of guests.
2. The property will be kept in a neat and orderly manner, including trash/recycling areas.
3. A contact manager will be provided to the ZEO that will have the ability of addressing any non-compliance issues. In the event the contact manager changes, a new contact will be provided within 24 hours.
4. Any non-compliance issues will be immediately addressed in compliance with Section 16.19.6 of these Regulations.
5. There will be no outdoor events. All activities shall be orderly and considerate of all neighboring properties.
6. Noise levels shall meet the State of Connecticut "Control of Noise" Regulations.
7. There will be no on-street parking.
8. An annual renewal permit will be submitted in accordance with Section 16.19.2 of these Regulations.
9. The ZEO or an agent thereof (such as the Resident State Trooper or Town Planner) has the right to inspect the property at any time. A 24-hour notice will be provided unless there is a complaint of a neighborhood disturbance.
10. A guest register shall be maintained.

_____ Owner Date _____
Print Name

_____ Owner Date _____
Print Name

_____ Applicant Date _____
Print Name

Notary Public Acknowledgement

State of Connecticut, County of New London Seal:

I hereby certify that _____ appeared before me on this
_____ day of 20_____ and signed this in my presence.

_____ My Commission expires on _____
Notary signature
Print name:

If this is a corporation, Corporate Seal is required.