

OFFICE USE ONLY

STR #:
FOLIO #
PID #
RECEIPT #
LICENCE #



District of Invermere
914 – 8th Avenue
PO Box 339
Invermere, BC V0A 1K0
<https://invermere.net>
Tel: 250-342-9281

SHORT-TERM RENTAL ACCOMMODATION BUSINESS LICENCE APPLICATION

Application Type: New _____ (\$400.00) Renewal _____

Registered Owner(s) of Property Information

Registered Owner Name(s): _____

If Owner is a corporation, provide name of its President: _____

Owner Mailing Address: _____

City/Town: _____ Province: _____ Postal Code: _____ Country: _____

Telephone # _____ Cellphone # _____

Owner(s) Email: _____

Business Operating Name (if applicable): _____

Short-Term Rental Accommodation Unit Details

Address of Unit to be rented: _____

Unit Number: _____ Postal Code: _____

Is this your Principal Residence? Yes No *Note: A Principal Residence means the Dwelling Unit inhabited by a Principal Resident the majority of the calendar year.*

Short-Term Rental Accommodation Property Zoning: _____

a. Strata Building? Yes No Part of a Bare Land Strata development? Yes No

If 'Yes', you must include proof of Strata Council approval with your application.

If Strata, provide name of Strata: _____

Does the Strata Corporation Insurance policy cover STR business activity? Yes No

b. Fee Simple Property? Yes No

Does your home insurance policy cover Short-Term Rental business activity? Yes No

Is the entire unit rented? Yes No Number of legal bedrooms in the unit to be rented: _____

Do any bedrooms sleep more than two Guests: Yes No *If yes, describe* _____

Do you have other areas for Guests to sleep: Yes No *If yes, describe* _____

Number of parking spaces (one space= 6m x 2.7m) located **on** the property: _____

Required Responsible Person(s)

If the Short-Term Rental Accommodation unit is **not your primary residence you must provide three (3) Responsible Persons**. Please review *Business Licencing Bylaw 1647, 2023* for the requirements of the Responsible Person.

Primary Responsible Person Name: _____

Local Contact telephone # _____ Local contact Cellphone # _____

Local Contact/s email: _____ and _____

Secondary Responsible Person Name: _____

Local Contact telephone # _____ Local contact Cellphone # _____

Local Contact/s email: _____ and _____

Tertiary Responsible Person Name: _____

Local Contact telephone # _____ Local contact Cellphone # _____

Local Contact/s email: _____ and _____

DECLARATION

By applying for this licence I acknowledge and commit to complying with *Business Licencing Bylaw No. 1647, 2023* including and not limited to the following regulations, terms, and conditions:

1. Every holder of a licence for a Short-Term Rental Accommodation business must have three Responsible Persons who are available and able to provide guest services 24 hours per day to guests in the Short-Term Rental unit, must provide the District of Invermere with the Responsible Persons contact information, and post that information in a conspicuous place within the unit.
2. The Responsible Persons for a Short-Term Rental Accommodation unit must be available to respond to any noise or other complaints received from the District of Invermere, RCMP, or the public, within a thirty (30) minute time-period (for each event).
3. Every holder of a licence for a Short-Term Rental Accommodation business must post a copy of the Business Licence in a conspicuous place within the unit.
4. The District of Invermere has the right to inspect the Short-Term Rental Accommodation unit, upon application for a licence, or for verification of information purposes, or for enforcement purposes.
5. Guest safety requirements include posting information regarding: Fire Alarm Evacuation directions; Smoke / Fire Alarms; Carbon Monoxide Alarms; and Fire Extinguishers. These requirements shall be to the satisfaction of the Chief of the Invermere Fire-Rescue Department or their authorized designate.
6. Short-Term Rental Accommodation units subject to three or more violations within a one-year period may have their Business Licence revoked or suspended for a one-year period. Invermere Council reserves the right to revoke the Business Licence of a Short-Term Rental Accommodation unit and/or operator at any time should the circumstances, in Council’s sole discretion, warrant revocation.

I (we) hereby make application for a Short-Term Rental Business Licence in accordance with the provisions stated above and declare that our statements to be true and correct. I (we) undertake that if granted a Short-Term Rental Accommodation Business Licence, I (we) will comply with all the obligations stated in this application, and with all legislation and bylaws now in force or which may hereafter come into force in the District of Invermere. Business Licences are effective from January 1st to December 31st of the Licence year,

are non-transferable, and the licence fee(s) paid are non-refundable. Short-Term Rental Accommodation Business Licences must be renewed at the start of each year.

I understand I cannot commence business until such time as a Short-Term Rental Accommodation Business Licence has been approved and issued.

Name and Signature of Owner/Applicant or Authorized Signatory (i.e. President):

Owner Name: _____ **Signature:** _____ **Date:** _____

Owner Name: _____ **Signature:** _____ **Date:** _____

Submission Checklist

- Short-Term Rental Business Licence Application (signed by all those listed on Title)
- Short-Term Rental Annual Self Evaluation Audit & Attestation
- Copy of the Fire Safety Plan
- Proof of Strata Approval of Short- Term Rental Accommodation as a permitted use (if required)
- Proof of Signing Authority on behalf of the corporation (if required)
- Authorization of Agent (if required)

Please send documentation to dpcoordinator@invermere.net and include the link to your listing platform. Once your application is reviewed for completeness, we will reach out in regards to next steps including payment of applicable application fees. Applications will not be processed unless all required documentation is attached to this application.

Completion of this application does not guarantee approval of the application. Approved licences will be issued only upon receipt of payment for the Short-Term Rental Accommodation Business Licence and receipt of associated documentation. Operating a Short-Term Rental Accommodation Unit without a valid licence is an offence for which penalties are prescribed. A person found guilty of an offence under District of Invermere *Business Licencing Bylaw No. 1647, 2023* is subject to a fine for every instance that an offence occurs or each day that it continues pursuant to District of Invermere *Ticket Information Utilization Bylaw No. 1130, 2002*, as amended, in addition other penalties may be applied through Court action.

Collection and usage of personal information by the municipality.

Application information is being collected for the purpose of determining the Operator’s eligibility for a Short-Term Rental Accommodation Business Licence in the District of Invermere pursuant to its Bylaw(s). In providing this information, you have consented to its use for the above-described purpose and declare that all the information provided herein is correct. This information may be shared with applicable District of Invermere departments and related agencies for the purpose of required inspections and approval of this licence application. The legislated authority to collect your personal information is Section 26 (c) of the *Freedom of Information and Protection of Privacy Act* and the *Business Licencing Bylaw No. 1647, 2023*. If you wish to obtain further information regarding the collection of your personal information, please contact the District of Invermere’s Corporate Officer.

OFFICE USE ONLY

STR# _____ Folio #: _____ PID #: _____

Zoning: _____ Description of Zone: _____

Ownership Verified (Yes / No): _____

Confirmation, if required, that Strata Corporation allows STR Accommodation activity (Yes/No): _____

Parking Requirement Met (Yes / No): _____ spots available Additional Strata Guest parking: _____

Maximum Guest Occupancy allowed: _____ Maximum Guest Occupancy Requested: _____

Are there other STR's within 100 meters (330 feet) of this property? (Yes / No)

Reviewed By Name and Title: _____ Date: _____

Inspection Required (Yes / No): _____ Date of Inspection/s: _____

Inspector Name and Title: _____

Comments: _____

Application Decision: Approved Rejected

Decision Reasoning:

Maximum Guest Occupancy Approved: _____ Guests

Name: _____ Title: _____

Signature: _____ Date: _____