



CITY OF CHELAN
DEPARTMENT OF COMMUNITY
DEVELOPMENT

135 E JOHNSON AVENUE, PO BOX 1669, CHELAN, WA 98816
TELEPHONE: (509) 682-8017 FAX: (509) 682-8050

License No. _____

**2024 ANNUAL SHORT-TERM RENTAL
OPERATORS LICENSE APPLICATION**

Applicant Information

Owner's Name: _____ Date _____
Company Name: _____
Physical Address: _____
City: _____ State: _____ Zip: _____ Phone: _____
Evening Phone: _____
E-mail: _____
Mailing address if different from above: _____
City: _____ State: _____ Zip: _____

Short Term Rental Property Information:

Chelan Business License #: _____ Washington State
Parcel Number (APN): _____ UBI#: _____
City Property Address: _____

Responsible Party/Property Management Co Information

Management Agency (if applicable): _____
Physical Address: _____
Phone Number: _____
Email: _____

FEES FOR SHORT TERM RENTAL LICENSE

NEW STR LICENSE FEE \$400.00

AMOUNT PAID: _____ DATE: _____ RECEIVED BY _____

Site Information

Does your property have any other land use permit (Shoreline Permit, Conditional Use, Variance)

Yes / No

If yes, please mark any that apply and list permit number if you have it.

Shoreline: Permit/Variance/CUP #:

Conditional Use #:

Variance #:

Planned Development #:

Detailed Structure Description: Please provide a description of the entire structure along with the portion being used as a short-term rental. (examples: single family home with an upstairs studio apartment to be rented for overnight rental, entire 3-bedroom home to be rented whole, 2-bedroom condominium).

Check any that apply to your Short-Term Rental Property:

Single-family dwelling

Manufactured home

Multi-family unit (duplex, tri-plex, +)

Condominium

Fractional share unit

ADU (ADUs are not permitted for STR

Mixed-use (commercial/residential)

unless as part of development agreement)

Overnight Rental Information and Occupancy

Rental Beds _____

Rental Bathrooms _____

Occupancy = 2 adults x double occupancy bed (+ up to 4 children 6 years in age or older)

*Properties that want to accommodate 10 or more guests, may need to comply with additional health and safety regulations as deemed necessary by the building official and be greater than **2000 square feet** gross floor area to comply with the International Residential Code.

Total Occupancy _____

Square Footage of Residence _____

SHORT TERM RENTAL OPERATING LICENSE SELF-CERTIFICATION CHECKLIST

The purpose of this form is to provide short-term rental property owners a guide when inspecting their properties to ensure compliance with the standards set forth in City of Chelan Short Term Rental Operating License, CMC Chapter 5.15.

Multi-use buildings

- For multi-use buildings with commercial and residential uses, please consult with building official before continuing with checklist.

Life Safety

- House numbers are installed and clearly visible from the street or common areas.
- Exit stairs are in good repair and have proper landings and handrails/guardrails. Handrails required on all stairways at least one side.
- Stairway width shall be minimum 36", and rise (7 3/4" max)/run (10" min) are sufficient.
- Door locks are present and operative.
- Window locks are present and operative.
- Windows in bedrooms must be present and have 5 sqft opening.
- Porch, deck, or balcony are in good repair and have guardrails.
- Exit/egress doors must be 32 inches in width, 78 inches height and hinged.
- All sleeping rooms must be a minimum of 70 sqft and have a minimum wall length of 7'.

Exit(s)

- Exterior doors and/or door framework are in good repair.
- Exit windows from sleeping rooms are provided and sufficient in area or dimension.
- Exiting is sufficient in number, width, or access for the occupant load served.

Fire

- Operative smoke detectors and CO monitors in all sleeping rooms, outside of sleeping areas, and on each floor of dwelling.
- Fire extinguishers in cooking areas present and clearly labelled
- Appropriate storage, and lack of building clutter or other fire hazards.

Electrical

- Every habitable room contains at least two electrical outlets or one outlet and one light fixture.
- All electrical equipment, wiring, and appliances have been installed and are maintained in a safe manner.
- Ground fault circuit interrupters are installed in the bathrooms and kitchens.
- Light fixtures, receptacles or switches are in working order.

Plumbing, Heating, Ventilation, and Sanitation

- Dwelling equipped with bathroom facilities consisting of a toilet, sink, and either a bathtub or shower and in sanitary condition.
- Dwelling equipped with kitchen facilities consisting of a stove, refrigerator, and sink.
- All plumbing fixtures connected to the sanitary sewer system and equipped with proper "P" traps.
- All plumbing fixtures connected to an approved water supply and provided with hot and cold water necessary for their normal operation.
- Dwelling is equipped with operable heating..
- Any solid fuel burning appliances are installed per applicable codes and maintained in safe working condition and properly ventilated.
- Dwelling has ventilation in all rooms
- Temperature/pressure relief valve present on water heater.
- Adequate and operative heating or mechanical equipment.
- Dwelling is equipped with heating facilities in operating condition.
- No signs of mold or mildew on wall surfaces.
- No signs of infestation from rodents or insects.
- Dwelling is equipped with adequate garbage and rubbish storage.

Structural

- Dwelling has no sags, splits or buckling of ceilings, roofs, ceiling or roof supports or other horizontal members due to defective material or deterioration.
- No split, lean, list, or buckle of dwelling walls, partitions, or other vertical supports due to defective material or deterioration.
- Fireplaces and chimneys are not listing, bulging, or cracking due to defective material or deterioration.
- No evidence of decay or damage to exterior stairs or decks.

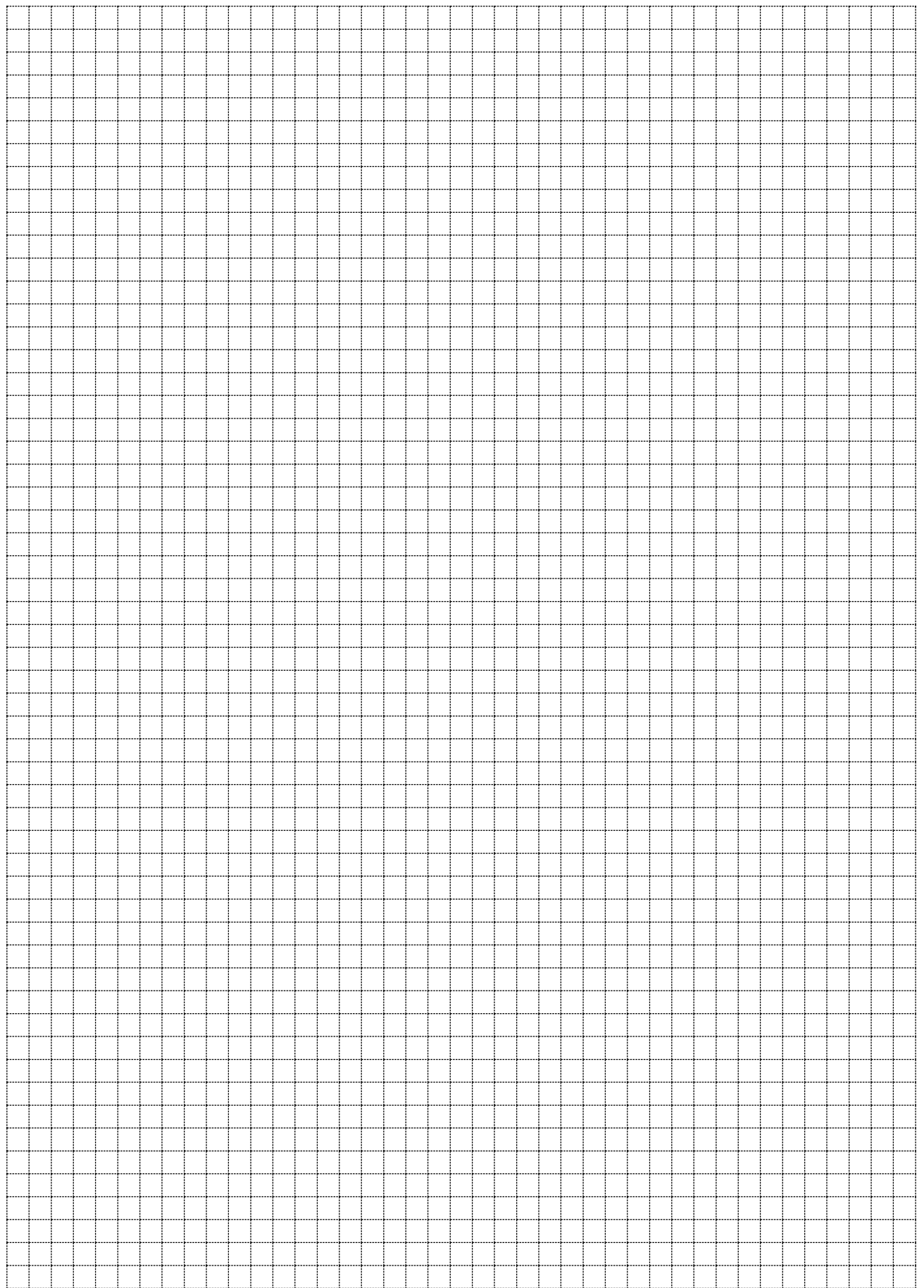
Weather Protection

- Dwelling has no broken windows or doors.
- No broken, rotted, split, buckled of exterior wall or roof coverings that affect the protection of the structural elements behind them.

SITE PLAN/BUILDING/PARKING PLAN CHECKLIST

Use the accompanying page or submit as an attachment.

- Sketch of site plan and building. Previous building plans may be submitted or amended to. Must be drawn to scale, not to exceed 1"=20'. Indicate the scale used.
 - Label the square footage of each room and of the total structure
 - Label property line locations and dimensions. Identify the distance between property lines and buildings
 - Label name or number of all streets and alleys adjacent to the site.
 - Label the location, size, and use of all building(s) on site.
 - Identify and label the location of ON-SITE parking for rental guests (1 space/2 bedrooms required). Parking must be within front and side yard setbacks and a minimum of 9 x 20 ft. Driveway parking spaces are exempt from the front and side yard setback.
 - Building Plan: Submit a scaled drawing of your existing structure clearly labeling the following where applicable:
 - Identify the spaces in your structure to be used as a short-term rental unit and label the square footage
 - Identify and label short term rental entrance if different from primary residence
 - All doors and windows
 - Label location of all vertical or horizontal occupancy separations and /or area separation walls (if any).
 - Label location of any fire extinguishers, fans, vents, smoke detectors, fire alarm, or sprinkler system locations
 - Dark Sky Ordinance: Label any outdoor lighting fixtures and any accent lighting, ensuring aiming of lights downward onto the ground surface.
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I hereby certify the following:

- I will pay all license fees as required by law.
- I have a current Washington State Business License and City of Chelan business license.
- I have sent notice of my intent to operate a nightly rental to my neighbors within 250' of my property.
- I have read the Good Neighbor Guidelines and will make them available to my guests.
- I have completed the self-certification checklist to the best of my ability.
- I have no outstanding Chelan Municipal Code violations, fees or penalties.
- I have adequate liability insurance (\$1 million) for short-term rental coverage of my property.
- I understand my business is subject to all local and state excise sales and B & O taxes that apply, including hotel/motel excise taxes, payable by me or my agent and is registered with the DOR as such.
- I also hereby certify under penalty of perjury under the laws of the State of Washington that the above answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____

Print Owner/Applicant Name: _____

Place Where Signed: _____, WA

Internal Review Only

- Complete application
- Land use zoning compliant
- Site plan complete
- Parking adequate
- Code violations or complaints / Case # _____
- Signatures and date

Health and Safety Inspection

Inspected by:

Date:

Conditions of approvals:

Signature: _____ Date: _____