BOIS BLANC TOWNSHIP
Application for Short Term Rental Permit

431 Sioux Ave
PO Box 898
Pointe Aux Pins, MI 49775
231-634-7275

PROPERTY INFORMATION

Property Owners Name:_____

- **Contact info: Phone**_____**e-mail:**_____
- **Mailing Address:**_____

  _____

Rental Address/Information:

- **Street & Number**_____
- **Parcel Number**_____
- **Phone in house Y/N – if yes, number**_____
- **Requested total sleeping capacity**_____
- **Currently being used as STR Y/N**

Applicant's Name (if different from owner)_____

- **Contact info: Phone**_____**e-mail:**_____
- **Mailing Address:**_____

  _____

  ***Written authorization attached** ☐

Local Contact Representative

Name:_____

Address:_____

Phone:_____**- E-Mail**_____

FEE SCHEDULE: (October 31 is anniversary date. Fees are not prorated.)

$100 Non-refundable Application Fee (To be applied to Permit Fee when/if issued)

$300 Annual Permit Fee – or - $300 Annual Renewal Fee

FACILITY INFORMATION

of Bedrooms_______________ emergency egress windows per room:_________

# of Beds_________________

# of Bathrooms: full________________ half______________

# of off-street parking spaces:___________________

Date Septic was installed or last inspected:____________

Water Tested: (date)______________________ Agency:__________________

Are pets allowed? Y / N Lake access on Property Y / N Usable Dock Y / N

# of fire extinguishers____________ Locations:___________________________________

ATTACHMENTS REQUIRED

[ ] Proof of Property Ownership: property deed, lease agreement, or land contract.

[ ] List of any restrictions on the property including access easement(s) or deed restrictions.

[ ] Site plan with property lines including location of septic field, docks (if applicable), driveway, well and parking area. Property lines and corners must be clearly marked on site.

[ ] Floor plan of facility with number of bedrooms to be occupied and/or other areas to be used for sleeping.

[ ] Proof of current rental (last 12 months).

Owner's Signature____Date____________

Applicant's Signature____Date____________

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Administrative Use & Information Only

Permit Issue date:_________________ Expiration Date:__________

Authorized by:_______________________________________ Title:__________________

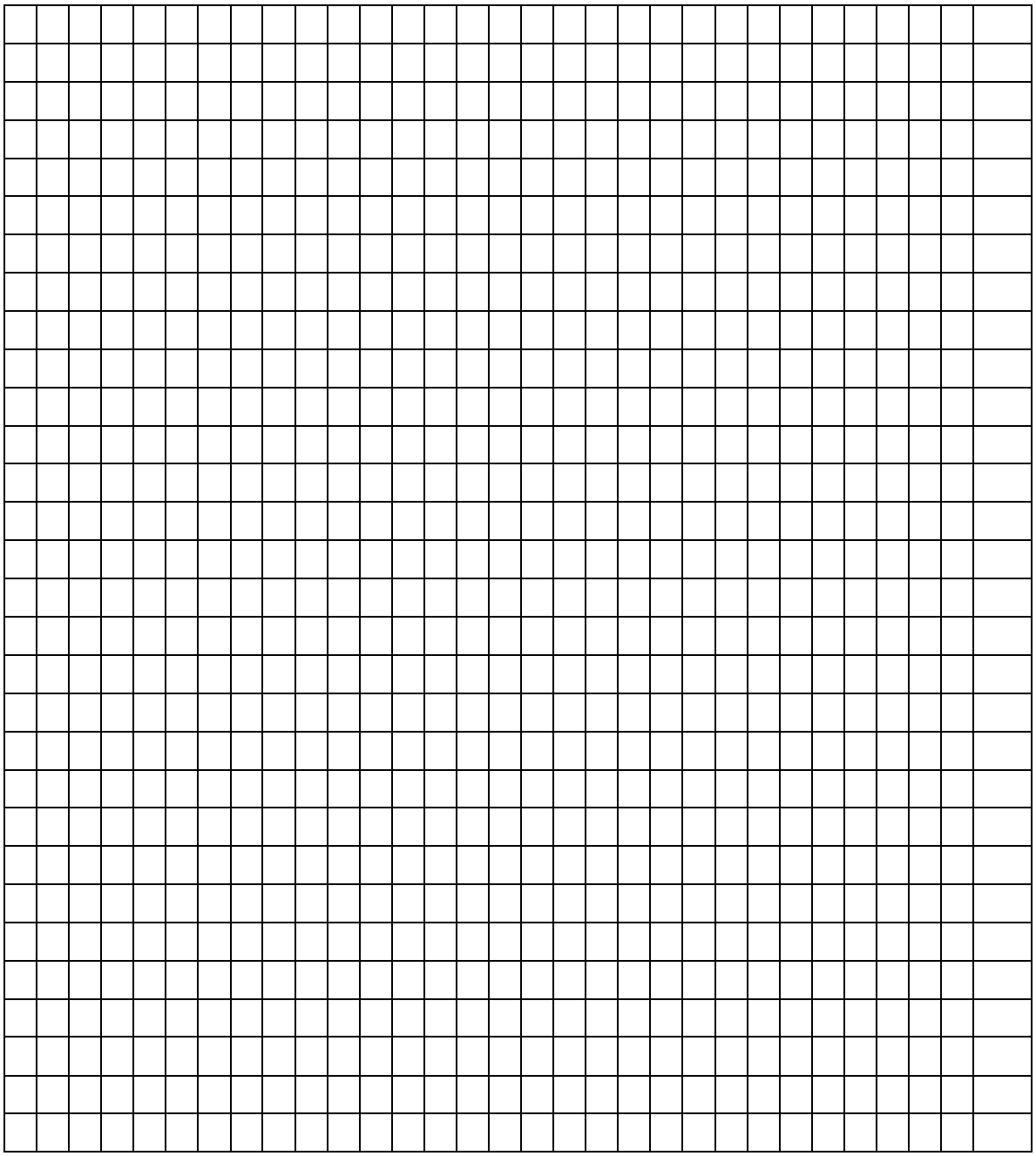
Signature:____ Date:__________________

Application Fee Pd: ________________ Date Pd:_________________

Permit Fee Pd: ____________________ Date Pd: _________________

Copies to: Owner/Applicant; Zoning/Code Enforcement Officer; Supervisor/Office files

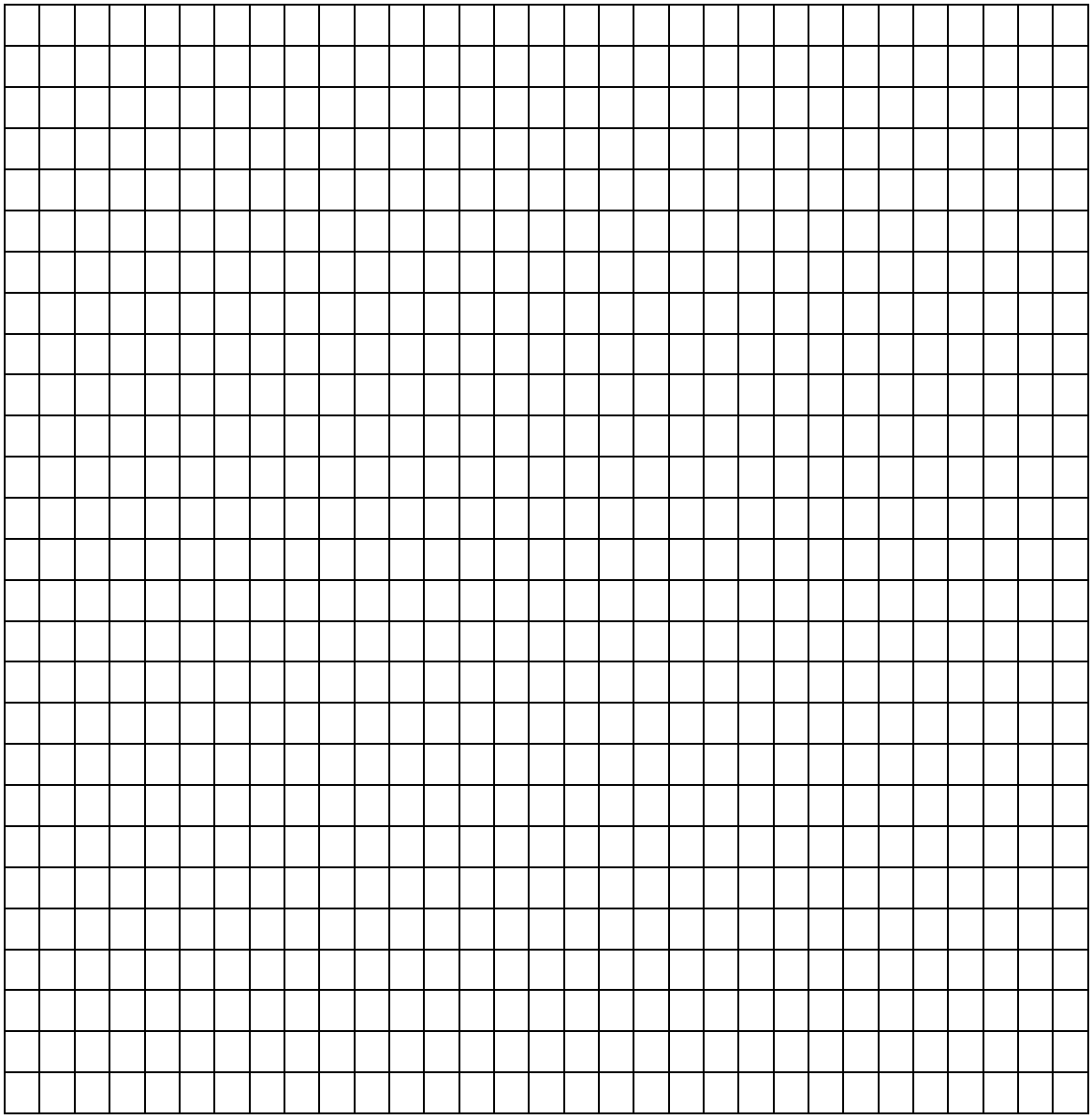
SITE PLAN: *Make a scale drawing below showing actual lines, angles, and dimensions of the structures and the parcel boundary to be used for the rental, the exact size (to scale) and location on the lot of all existing buildings, other structures, easements, parking areas, streets, driveways, well docks and septic field.* ****This page or an alternate must accompany your application!***



Township Administration Notes:

Copies to: Owner/Applicant; Zoning/Code Enforcement Officer; Supervisor/Office files

FLOOR PLAN DRAWING OF PROPOSED RENTAL UNIT: *Must include dimensions, ingress/egress locations (doors/windows), Bedrooms and alternate sleeping areas intended to be occupied.*



NOTICE TO APPLICANT

The purpose of the Site Plan and Floor Plan is to assist the Township in defining property boundary, uses and structures which will be involved in the rental application. The undersigned herby agrees to abide by all Zoning, Building, and other Township ordinances and regulations, to comply with all parking, easements and other requirements requested by the Code Enforcement Officer, and all state, county and LMAS health and safety requirements.

Date:_____ Applicant's Signature_____

Copies to: Owner/Applicant; Zoning/Code Enforcement Officer; Supervisor/Office files

Short-Term Rental Facility Safety List

The following items are meant to ensure the safety of the facility and guests. The list is not all inclusive, but meant to guide the property owner to make their facility an optimal site for the health, safety, and welfare of their guests. (HIGHLIGHTED ITEMS ARE REQUIRED)

ELECTRICAL

- Ground fault receptacle(s) in bathroom
- Outlets in working condition, easily accessed
- Avoid outlet extenders/power strips
- All lights working
- Exterior safety lights installed and in working order
- Interior emergency lighting and/or exit lighting
- Baseboard heat (if applicable) working; air conditioning units working
- Smoke alarms in each bedroom, kitchen and hallway

WATER & WASTE

- Water tested and approved by local health dept.
- Hot water tank working
- Septic/sewer in working condition
- Instructions for sewer alarms: who to call, what to do
- Laundry facilities (if applicable) working
- Instructions for trash removal with posted hours/costs for the transfer station

EXTERIOR/INTERIOR

- Rental's 911 address clearly posted
- Property corners visibly marked (staked, flagged etc.)
- Trash receptacles available and clean
- Adequate off-street parking
- Railings on exterior steps
- Docks safe, structurally sound and usable
- Safety flotation devises available on the dock (ring)
- Egress windows in bedrooms
- A posted emergency exit plan/route
- Fire extinguishers visible and up to date
- Wood stove/fireplace/chimney in clean, working condition

EMERGENCY & CONTACT INFORMATION

- 911 SHOULD ALWAYS BE USED FOR EMERGENCY!
- Alternate number for Law (non-emergency)
- Local Contact Representative Name & Phone Number
- Township Office number for complaints &/or questions
- Copy of the Mackinac County Animal Control ordinance or highlighted info from it. (Leash/licensing laws)

PERMIT SHOULD BE POSTED AND VISIBLE

Highlighted items have been completed/included: _____

Applican'ts initials

Copies to: Owner/Applicant; Zoning/Code Enforcement Officer; Supervisor/Office files