

CITY OF CRITTENDEN

117 S. MAIN ST. P.O. Box 207, Crittenden, KY 41030

Phone: 859-824-6351 email: crittendencityof@gmail.com website: cityofcrittendenky.com

**SHORT-TERM VACATION/HOUSING RENTAL
APPLICATION**

Application Fee \$250.00

Name/Primary Owner: _____

Mailing Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Email Address: _____

EMERGENCY CONTACT: (must live within 25 miles of short-term rental property)

Name/Primary Owner: _____

Mailing Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Email Address: _____

SHORT TERM RENTAL UNIT INFORMATION:

Address of Property: _____

Number of Bedrooms: _____

Maximum Number of Occupants: _____

The below documents & confirmations that are required prior to processing:

- Property Owner Deed
- Self-Safety Inspection Form
- Certificate of Insurance
- Site Plan/Survey (maximum number of vehicles that can be legally parked)
- Sketched Floor Plan (must include dimensioned room layout)
- Information Brochure (must be provided to guests)
- Rental Agreement
- Life Safety Fire Inspection
- Acknowledgement of responsibilities within City Ordinance under Chapter 64.

Short-term vacation/housing rental is defined as the rental of a residential dwelling unit, or a portion thereof, for a period not to exceed 14 consecutive days, with the exception of the months of January and February. I acknowledge my responsibilities under Chapter 64 in the City of Crittenden Ordinances.

_____ (initial here)

I affirm, under penalty of perjury, that the information contained in this application and all documents tenured in connection with this application are accurate and complete. Furthermore, I certify that I have reviewed and will comply with all other requirements of the City of Crittenden pertaining to short-term vacation/housing rentals.

_____ Name

_____ Signature

_____ Date

For Official Use Only- Approvals/Denial

Issuance of License is: Approve Denied (Notification to Applicant Attached)

Dated this _____ day of _____ 20____ Authorized By: _____

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**SHORT-TERM VACATON/HOUSING RENTAL
SAFETY CHECK LIST**

Name: _____

Phone number: _____ Email: _____

Rental Address: _____

A fire safety plan shall be posted on each level of the home and inside each bedroom.

1. The fire safety plan shall include the following information:
 - a. Phone number and procedures to report an emergency:
 - i. Grant County 911 Emergency
 - ii. Grant County Non-Emergency 859-428-1212
 - b. Property Address
 - c. Floor Plans identifying the locations of the following
 - i. Exits
 - ii. Primary evacuation routes
 - iii. Secondary evacuation routes
 - iv. Portable fire extinguishers
 - d. Name and phone number of an emergency contact for the property.
2. The property address must be installed on the exterior of the home in a location that faces the road. The address numbers must be at least 4 inches in height.
3. Gas or other fuel fired appliances must have 36 inches of clearance. (No storage for 3ft)
4. Portable unvented fuel fire heating equipment is prohibited from use (No kerosene heaters)
5. Electrical outlets, switches, junction boxes and any other electrical boxes must have cover plates.
6. No open unconnected wires are permitted. All open wiring must be in electrical junction boxes.
7. Electrical panels require a minimum 36 inches in front of the panel. No storage shall be within this 36 inches.
8. Extension cords shall not be used for permanent wiring. Ensure that extension cord usage within the home is only for temporary use.
9. Holes in walls, ceilings and doors must be repaired
10. A portable fire extinguisher must be present on every level of the home. A minimum size of 2A10BC is required.
11. Smoke Alarms are required to be installed in the following locations:
 - a. In every bedroom
 - b. One in hallway adjacent to bedrooms
 - c. On every level of the home
 - d. Battery-operated smoke detectors more than 10 years old shall be replaced
12. Carbon Monoxide alarms shall be installed in the following locations:
 - a. On every level of the home and located adjacent to bedrooms
 - b. If the home uses fuel-fired appliance(s) and no bedroom is located on a level, the carbon

monoxide alarm shall be placed in room of fuel fired appliance(s)

13. Every bedroom shall have two means of exit. Either two exit doors or an exit door and window. If a bedroom does not have two means of exit, then it may not be used for short term rental.
 - a. The window must be at least 24 inches high and 20 inches wide. The window may not be more than 44 inches from the floor.
 - b. A bedroom exit door may not be less than 28 inches in width and 81 inches in height.
14. All windows and doors must operate and able to be opened.
15. The exterior of all exits shall be free of obstructions.
16. No flammable liquid storage shall be brought onto property by occupant or guest of the short-term vacation/housing rental.

**By signing below, I acknowledge completion of the SHORT-TERM
VACATION/HOUSING RENTAL SAFETY CHECK LIST and have ensured that the
structure located at**

(address) _____

**meets all of the required fire and life safety code requirements as a condition of the rental
permit application.**

Printed name: _____ Date: _____

Signature: _____