

TOWN OF LAKE PLEASANT

2679 Route 8 P.O. Box 799

Lake Pleasant, NY 12108

Phone: 518-548-3625

Fax: 518-548-3028

Short-Term-Rental (STR) Owner Registration Form

(Registration Fee: \$50/Unit Registered)

Owner of property _____

Permanent Address (*Mailing*) _____

Phone Number _____

Local contact _____

Local contact phone number _____

Physical address of property

Maximum occupancy of building _____

Please answer the following questions as yes or no.

1. Are fire extinguishers available and up to date? _____

2. Are smoke detectors present and up to date? _____

3. Is there a carbon monoxide detector on each floor? _____

4. Are there adequate exit routes in case of emergency? _____

5. Is an escape plan posted? _____ (*Recommended if not obvious*)

Note: Please continue, sign and date where indicated on rear.

6. Is the septic system in alignment with occupancy? _____

6 a. Has the septic tank been pumped as recommended? _____

It is recommended that a septic tank be pumped every 2-3 years or more frequently if signs of pooling or odor are present.

7. If well water is available, has it been tested? _____ *(Encouraged and Recommended)*

Note: Regarding septic and well testing - Information about well and septic testing and kits for same are available at our local soil & water department. (518-548-3991 or www.hamcoswcd.org)

8. Is there adequate parking for your guests ? _____

9. Is the address visible for emergency services? _____

10. Are railings present on staircases and decks as required by NYS Building Code Safety Requirements? _____

*(Note: Current NYS Building Code regarding railing requirements:
- Railings are required on decks when distance from deck surface to finished grade is greater than 30".
- Railings are required on steps or stairs when more than three rises are involved in a stairway section.)*

Approved registration does not constitute a warranty by the Town of Lake Pleasant that the premises are suitable for commercial purposes, and property owners are responsible for adhering to the requirements of New York State Code Regulations as well as any third-party Short-Term Rental Provider in ensuring that units are appropriately maintained in the conditions required for said purpose.

Signature of Applicant _____

Date of Application _____

Fee Paid: _____

Initials of Town Representative accepting application _____