SHORT-TERM RENTAL PROPERTY MANAGEMENT PLAN

UBI#_	
Chelar	County short-term rental permit #
Short-	Term Rental:
	Address:
	Phone:
Proper	rty Owner/Operator:
Name:	
Addres	s:
	Contact/Property Manager who can respond on-site within 60 minutes for encies or complaints:
Name:	
Phone:	
Addres	s:
Email:	
Numbe	er to call for Police/Fire/Emergency Medical:
How w	vill owner/operator will notify renters of emergency or temporary conditions:
# of 'be	edrooms':
Maxim	um # of guests:
Maxim	um # of vehicles:
	Plan of dwelling and entire site map here) may be hand drawn and must include:
<u> </u>	Floor plan may be hand drawn but <u>must</u> clearly show o Emergency escape route and fire exits Site Map may be hand drawn but must clearly show o Designated parking spaces o Property boundaries including if there is easement to shoreline or access-

this must be clearly defined (if there is no access, this must also be noted

with a warning not to trespass

Fire Protection Plan

(insert here)- should be consistent with a 'Ready-Set-Go' program or equivalent

Include Good Neighbor Guidelines

(brochure on Chelan County Short-Term Rental Web page that can be printed at will. Fill out and insert here)

Consumer	safety:
----------	---------

Location of carbon monoxide alarm:	(other criteria are
met above)	

Notes:

- 1. Liability insurance consistent with RCW 64.37.050 must be maintained at all times dwelling is permitted
- 2. Property Management Plan must be kept up to date. If any included names/addresses/phone numbers change during the year, an update needs to be sent to the Department.