

CHELAN COUNTY

COMMUNITY DEVELOPMENT- SHORT-TERM RENTALS 316 WASHINGTON STREET, SUITE 301, WENATCHEE, WA 98801 TELEPHONE: (509) 667-6464

Short Term Rental Self Certification Checklist for Renewals

Address/Location:					
Parcel#:	STR#:	Tie	er#:		
Owner/Occupants:					
Owner Phone:	# Of Bedroom	IS			
Date of Self-Inspection:	# Of Occupan	ts			
Emergency or Local Contact:					
Phone: Email:					
Access & Premises			YES	NO	N/A
1. Are address numbers for the dwelling clearly visible from th	e street or acce	ss road?			
2. Is the exterior fire department access unobstructed?					
3. Is combustible vegetation/materials removed from within 5ft of the dwelling so that it will not create a fire Hazard?					
4. Is a minimum three-feet (3') clearance maintained around fir property?	e hydrants loca	ted on the			
Egress (Exiting)					
1. Are the exit doors and escape emergency windows easily recognizable, unobstructed and maintained?					
2. Does any space used as a bedroom (provides sleeping accommodations) have a door or window of egress directly to the outside that meets the International Residential Code?					
3. Does the emergency escape window meet the minimum dimensions of, 20 inches in width, a height of 24 inches, and a net clear opening of 5.7 square feet. (Main floor, egress level windows only require an opening of 5 square feet)					
4. Is the bottom of the emergency escape window not more that floor?	an 44 inches abo	ove the			
Electrical					
1. Are all electrical outlets, switches, and junction boxes prope plates, and is the electrical system safe from any apparent sho					
2. Are extension cords used only for temporary use?					
3. Are extension cords plugged directly into an approved receptacle, power tap or multiplug adapter and, except for approved multi-plug extension cords serve only 1 portable appliance?					
Fire Alarm System/ Sprinkler System					
1. If equipped with a fire alarm, sprinkler and/or other fire system of the fire system(s) been performed by the owner or qualified		ired service			
Fire Safety & Evacuation Plans					
1. Does the premise have the ready, set, go and fire wise inform	mation?				



Fire Prevention and Investigation CHELAN COUNTY

2. Does the premise have a floor plan indicating fire	exits and escape routes?			
3. Does the premise have the good neighbor pamphlet and emergency contacts?				
4. Is an operable landline or Voice Over Internet Protocol (VOIP) telephone installed?				
5. Do all outdoor portable or permanently installed wability to be secured from use during fire restrictions		9		
Fire Extinguishers				
1. Is there access to fire extinguisher(s) UL rated at a minimum 2A-10BC?				
2. Have the fire extinguisher(s) been serviced/tagged by a fire extinguisher company or bought brand new and tagged with purchase date within the last 12 months?				
3. What is the date that your fire extinguisher(s) was last serviced or purchased?	Date:			
4. What is the name of the company that serviced the fire extinguisher?	Company name:			
5. Fire extinguisher(s) must be mounted properly; locations near exit doors where possible. (When mounting, the top of the extinguishers should be no more than 5 ft above the floor and the bottom shall be a minimum of 4 inches above the floor.)				
6. Is there a fire extinguisher prominently available in the main space? (The travel distant to a fire extinguisher shall not exceed 75ft.)		nce		
Heat Producing Appliances & Mechanical Ha			_	
1. If portable electric heaters are used are they plugged directly into wall outlets (receptacles) and located a minimum of 3' away from combustibles?				
2. Is the clearances maintained between combustible materials and gas fired appliances (such as water heaters, furnaces, etc.)?		S		
3. Is proper venting to exhaust products of combustion intact for gas appliances?				
Smoke Alarms				
1. Are operable smoke alarms provided in common areas such as corridors and outside each separate sleeping area in the immediate vicinity of the bedrooms?		,		
2. Does each 'bedroom' (sleeping area) have an operable smoke alarm?				
Carbon Monoxide Alarms				
Does the dwelling have a functional Carbon Mond	oxide (CO) detector(s)?			
If you discover that you have any deficiencies on the check renewal. Please contact the Fire Marshal's Office or an Ins to correct the deficiencies and become complaint.		•		
I (We) certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true, correct and complete to the best of my (our) knowledge. I (We) further agree to comply with the International Fire Code and all applicable Chelan County/City codes. Applicants/Owner(s) assumes all risk and liability for any claims and liabilities.				
Name of Owner/Representative:		_		
Signature of Owner/Representative:		_Date:		
*Please submit this checklist along with your STR permit renewal application each year.				