

19 Parnell Street P.O. Box 180 Calabogie, ON K0J 1H0 Phone: 613-752-2222 Fax: 613-752-2617

www.greatermadawaska.com

APPLICATION FOR SHORT-TERM ACCOMMODATION LICENCE

In order to be eligible for consideration, all Short-Term Licence Applicants must complete and submit the following application form, including all applicable documents outlined in By-Law 19-2024.

Before beginning the application, I/WE acknowledge that I/WE have read and reviewed the Township of Greater Madawaska Short-Term Accommodation By-Law, By-Law 19-2024.

Before beginning the application, I/WE acknowledge that I/WE have prepared all the required documentation on the Township Website.

1.

APPLICANT	
1.1 Owner:	
Name:	
Address with Postal	
Code:	
Phone Number:	
Email Address:	
	f information differs from owner):
Name:	
Address with Postal	
Code:	
Phone Number:	
Email Address:	
1.3 Responsible Person	
Name:	
Address with Postal	
Code:	
Phone Number:	
Email Address:	

Note: By-law 19-2024 Section 3.03(j) states the designated responsible person can be readily contacted within sixty (60) minutes and respond to an emergency or contravention of any Township By-law.

2. SHORT-TERM ACCOMMODATE PROPERTY INFORMATION

3.

4.

OHORT TERM ACCOMMO	ATETROLERT IN ORMATION	
Civic Address:		
Assessment Roll Number:		
Maximum # of Bedrooms		
Maximum # of Occupants		
DECLARATION		
I/We do declare that I/we ur accordance with municipal I	derstand our responsibilities as a Licen bylaws.	see in
with this application is factu to all relevant by-laws, rules may be enacted by the Tow applicable federal or province amended, from time to time conscientiously knowing that under oath. I also hereby ag	anly declare that all information provided all and correct and agree to abide by and and regulations, matters and things as a nship of Greater Madawaska, and to an cial legislation or regulation in effect, en and make this solemn declaration at it is of the same force and effect as if the ree to authorize the Township of Greater of the formation deemed pertinent in granting the same force.	d adhere are, or y acted, or made
Signature of Applicant	Date of Signature	
INDEMNIFICATION AGREE	MENT	
the Corporation of the Tow Members of Council from ar losses, actions, and other p suffered by, or imposed, or	at I shall at all times indemnify and save nship of Greater Madawaska, its employed and against any and all manner of claims, roceedings whatsoever made or broug the Township in respect of any loss, of erty, which are occasioned by or attribut peration of the business.	oyees and demands ht against damage o
Signature of Applicant	 Date of Signature	

Date of Signature