

SHORT TERM / BED and BREAKFAST APPLICATION

License valid for on (1) year only and is nontransferable

Application \$ 100.00

Operation of a Short-Term / Bed and Breakfast Rental without a valid Short-Term / Bed and Breakfast Rental license or in any manner inconsistent with the information provided in the application or the conditions of approval of the license is a violation of the Town of Darrington Municipal Code.

Applicant Name _____
(main contact person) Agent for owner must complete the agent authorization form.

Subject Property Address _____ City _____ State _____

Assessor's Parcel Number _____ Zoning Designation _____

Current Washington State Business License Number (UBI) _____

Owner Name _____

Owner Address _____ City _____ State _____ Zip _____

Owner email address _____ Telephone Number _____

Applicant Address _____ City _____ State _____ Zip _____

Applicant email Address _____ Telephone Number _____

Operator of Record Name _____

Operator of Record Address _____ City _____ State _____ Zip _____

Operator of Record email address _____

Telephone Number _____ Must be available 24/7 when guests are present

Number of guest bedrooms _____

(Please provide Snohomish County Health Department Septic Permit to confirm number of bedrooms served)

Number of off-street parking spaces _____

(One off-street parking space is required for each guest room and full-time equivalent employee not residing at the property)

Maximum number of guest _____

Is this property unit part of a condominium or Homeowners Association (HOA)?

_____ Yes _____ No

(If yes, a signed letter from an officer of the condominium / homeowners association approving the use of a unit as a Short-Term / Bed and Breakfast Rental Unit is required)

Is the property unit part of a mixed-use development? _____ Yes _____ No

If yes what other land uses are in the building or on the site _____

Has the unit been approved as a habitable space in accordance with current building codes?

_____ Yes _____ No (If not, a building inspection may be required)

Are new signs proposed? _____ Yes _____ No

(If yes, a sign permit may be required. Any signage must comply with the Town of Darrington Municipal Code)

Will food be provided or served to guests? _____ Yes _____ No

(If yes, unless served food will be limited to prepackaged or otherwise non-potentially hazardous foods per WAC 246-215-01115, please provide documentation of a Snohomish County Health Department permit)

Has an annual fire inspection been conducted?

_____ Yes – please provide the inspection slip

_____ No – a fire inspection must be conducted prior to issuance of the Town of Darrington short-term / bed and breakfast license