

Town of Caroga
Code Enforcement Office
1840 State Highway 10, PO Box 328, Caroga Lake NY 12032

SHORT TERM RENTAL PERMIT APPLICATION

Property Owner _____

Application Number _____

Business Name _____

Date _____

Street Address _____

Mailing
Address _____

Primary Phone Number _____

*Complete if owner lives more than 30 minutes
physical response time from STR.

Secondary Phone Number _____

Local Agent/Manager

Email Address _____

Primary
Phone _____

Address of STR _____

Secondary
Phone _____

Tax Map Section/Block/Lot _____

Fulton County Tax Registration
Number _____

Email Address _____

Type of Structure

Rented in Part Rented in whole
Owner Occupied Non-owner occupied

***Attach the following necessary documentation to
this permit:***

Housing Platform(s)

***Septic System Design/inspection/Engineering
Forms***

Maximum occupancy (listed on housing platform)

Copy of Fulton County Tax Certificate

Number of off-street parking spaces

***Annual certification of that Chimney has been
cleaned if utilizing a solid fuel heating device.***

Septic System
Size Type Location

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APPLICANT ATTESTATION: I will comply with all the conditions of the Town of Caroga Short Term Rental Law, The Short Term Rental permit application process and the required Inspection checklist. I have attached a drawing of the building and parking layout. I certify that I have notification from my insurance company acknowledging that above property is being used as a short term rental. My signature also confirms that the property is safe and fit for human habitation.

Signature of Property Owner _____

Print Property Owner _____

Date _____

TO BE COMPLETED BY CODE ENFORCEMENT OFFICER

Date of Inspection _____

Maximum Occupancy per New York State Law _____

APPROVED DENIED

Reason for Denial and Required Remediation:

CODE ENFORCEMENT OFFICER SIGNATURE _____ DATE _____

**SHORT TERM RENTAL PERMIT APPLICATION
CODE ENFORCEMENT OFFICE INSPECTION**

Address and SBL # _____

Required Postings

Permit	Y	N
Invasive Species Information	Y	N
Emergency Contact Information	Y	N
Emergency Exit Map	Y	N
Parking information	Y	N

Occupant Load and Exits:

Is occupant load posted?	Y	N
Are exits per Code?	Y	N
Number of exits?	Y	N
Number of Bedrooms? First Floor _____		Second Floor _____
Is egress capacity adequate?	Y	N
Are exits free of storage?	Y	N
Do all exterior exits discharge directly outside?	Y	N

Doors and Ingress/Egress

Are doors blocked?	Y	N
Are doors locked?	Y	N
Do windows meet ingress/egress requirements?	Y	N
Is egress clear and unobstructed?	Y	N
Is common path of travel within code limits?	Y	N
Is travel through adjoining rooms unrestricted?	Y	N
Is hallway width adequate?	Y	N
Are Exits marked?	Y	N

Detectors & Alarms

Is there a fire detection system?	Y	N
Number of smoke detectors? First Floor _____		Second Floor _____
Number of heat detectors? First Floor _____		Second Floor _____
Number of carbon monoxide detectors? First Floor _____		Second Floor _____
Location of detectors? _____		

Are there audible alarms?	Y	N
Are there visual Alarms?	Y	N
Is there automatic fire department notification?	Y	N

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SHORT TERM RENTAL PERMIT APPLICATION
CODE ENFORCEMENT OFFICE INSPECTION

Protection of Hazards

Is the electrical panel box accessible?	Y	N
Is the electrical panel box labeled?	Y	N
Are there fire extinguishers?	Y	N

Location and Type _____

Building Systems

Is the heating system in good working condition? _____

Is the water heater in good working condition? _____

Is the water supply system providing potable water and in good working condition? _____

Is the range/cooking system in good working condition? _____

Heat Source

Gas

Oil

Electric

Solid fuel

- Wood or Pellet stove heating devices require annual certification that chimney was cleaned by a certified chimney sweep.

Sanitation System _____

Requires documentation of compliance with laws and regulations stated in STR Local Law.

Comments

CODE OFFICER SIGNATURE _____

DATE _____ TIME _____