

**SAN MIGUEL COUNTY  
PLANNING DEPARTMENT**



PERMIT # _____
RECEIVED _____
PAID _____

**APPLICATION FEE: \$75  
INSPECTION FEE: \$75**

**SHORT-TERM RENTAL PERMIT RENEWAL APPLICATION**

P.O. Box 548  
333 West Colorado Avenue, 3<sup>rd</sup> Floor, Telluride, CO 81435  
Phone (970) 728-3083 Fax (970) 728-3718  
Email: [planning@sanmiguelcountyco.gov](mailto:planning@sanmiguelcountyco.gov)

**APPLICANT SHALL COMPLETE:**

_____	_____	_____
Property Owner	Email address	Phone
_____		_____
Mailing Address/City/State/Zip Code		Cell Number
_____	_____	_____
Subject Property Address	12-Digit Parcel ID Number	Zone District
_____	_____	_____
Number of Bedrooms for Rent	Maximum number of people	# of parking spaces

Legal Description, Proof of Ownership and Authorization (required if Applicant is not Owner), must be Attached

_____	_____
Trade Name/Doing Business As (if applicable). Use same name as on Colorado Sales Tax License	CO Sales Tax License #

**Contact Person.** Each owner of a Short-Term Rental shall provide the Planning Department with the name, address, and contact information, including 24-hour contact telephone number, for the property manager or property management company, This information shall be updated by the owner if the contact information changes.

**24-Hour Contact Information**

Name:	
Address:	
Email:	
Contact Phone:	Cell Number:

I hereby certify, subject to penalty of perjury, that the above is true and accurate to the best of my knowledge and that I understand all provisions of County and State codes applicable to the proposed short term rental use, any and all conditions placed upon the proposed use by the Board of County Commissioners and all information requested by this document.

_____	_____
Owner's Name/Owner's Representative Name	Owner's Representative Contact Number

_____	_____
Signature of Applicant	Date

**IN ORDER TO PROCESS YOUR APPLICATION IN A TIMELY MANNER  
ALL INFORMATION ABOVE MUST BE COMPLETED PRIOR TO SUBMITTAL**

**SHORT-TERM RENTAL  
BUILDING AND ENVIRONMENT HEALTH DEPARTMENT  
INSPECTIONS**

**INSPECTION FEE: \$75.00** (payable to San Miguel County)

Pursuant to Land Use Code Section 5-3001 B. VI. this fee is upon initiation of an application for a Short-Term Rental Permit. **Approved Permits require subsequent renewals at two year intervals and will only require an affidavit signed by the applicant that the unit complies with all safety standards as listed in Section 5-30.**

Permitted Short-Term Rental Residences shall meet the conditions and standards as provided in Land Use Code Section 5-30 SHORT-TERM RENTAL. (A copy of these standards is available for review on the front page of the Planning Department webpage.)

Section 5-3001 B. IV. states that Dwellings must have an onsite wastewater treatment system recognized and approved by the County Environmental Health Department. The County Site Inspector will review submitted applications for compliance.

Section 5-3001 B. VI. states the rental residence will be inspected by the County Building Department for surface type safety concerns. Note: Building Department inspections are performed Monday – Thursday – 8:00am to 5:00pm. A 24 hour notice is required, please call 970-728-3923.

*Inspection Requirements: International Residential Code Compliance*  
*Emergency Egress from all sleeping rooms*  
*Smoke / CO Detectors – inside and outside of each sleeping room*  
*Ingress/egress path of travel*  
*Operable fire extinguisher in proximity to the kitchen*

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**AFFIDAVIT**

I, \_\_\_\_\_ certify that the dwelling  
Owner/Partners/Corporate Name

located at, \_\_\_\_\_ complies with all surface type safety  
Physical Address of the Short-Term Rental

concerns as listed in San Miguel County Land Use Code Section 5-30 [emergency escape windows in bedrooms, smoke and CO detectors, and ingress/egress paths of travel].

**Certification:**

By signing this document, I declare that the dwelling listed above is compliant with all the safety standards listed in Land Use Code Section 5-30 Short-Term Rental.

Property Owner's Signature	Date
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