1 & 2 Dwelling Structure Type A Accessory Short-Term Rental (ASTR) Permit Application Checklist

Only use this application checklist for a Type A Accessory Short-Term Rental in a structure with 1 & 2 dwelling units (such as a house or a duplex)

Items that MUST be submitted with the application

- ❑ Complete 1&2 Dwelling Structure Type A Accessory Short-Term Rental Permit Application
- ❑ Copy of the Neighborhood Notice which was mailed or delivered
- ❑ Copy of resident's Oregon Driver's License or Oregon Identification Card to confirm residency at the site. Please visit Oregon DMV (http://www.oregon.gov/ODOT/DMV/pages/driverid/index.aspx#id) for more information.
- ❑ Payment for Type A ASTR Permit Fees

  Inspection Verification Fee (and every 6 years) - $178.08 (*$159 + 12% State Surcharge*)
  The initial accessory short-term rental permit fee is waived for short-term rentals operating under a previously approved Conditional Use Land Use Review for a Bed and Breakfast.

  Renewal Applications (intervening years – or year 2, 4, 8, 10, etc.) - $62

Submitting the application

Type A ASTR Permits are not available via online permitting or payment at this time.

By Mail: Customers are strongly encouraged to mail complete applications with check (payable to City of Portland) to:

Bureau of Development Services
Enforcement Program
1900 SW 4th Avenue, Suite 5000
Portland, OR 97201

In Person: Applications with payments by credit card or cash must be submitted in person: Development Services Center (DSC), on the first floor of 1900 SW Fourth Ave. Visit the DSC, Monday – Friday, 8:00 am to 3:00 pm (12:00 pm on Thursdays). NOTE that the DSC service is on a first-come, first-served basis, and you may have a long wait time to submit your application.

Application Review and Inspection

After your application has been received, either via mail or DSC intake, BDS staff will review your application and contact you to arrange an inspection (initial application and every 6 years). Please allow up to two weeks from when it is determined that the application is complete for a BDS inspection. If you have questions after you submit the application, please contact the Enforcement Program at (503) 823-2633.

1 & 2 Dwelling Structure
Type A Accessory Short-Term Rental Permit Application

An accessory short-term rental (ASTR) is one where an individual or family resides in a dwelling unit and rents bedrooms to overnight guests for less than 30 days. The regulations allow accessory short-term rentals in all residential structure types when accessory to a Household Living use. These regulations are found in section 33.207 in the City of Portland's Title 33 Planning & Zoning Code.

There are two types of accessory short-term rentals based on the number of bedrooms rented:

- **Type A Accessory Short-Term Rental** is one where the operator rents no more than 2 bedrooms to overnight guests. ***A Type A Accessory Short-Term Rental Permit is required.***
- **Type B Accessory Short-Term Rental** is one where the operator rents between 3 and 5 bedrooms to overnight guests. ***A Conditional Land Use Review is required.***

STOP:

Only use this application form for a Type A Accessory Short-Term Rental in a structure with 1 & 2 dwelling units. Typical structure types include houses, attached houses, duplexes, attached duplexes, manufactured dwellings (manufactured home, mobile home, and residential trailer on its own lot or in a manufactured home park), accessory dwelling units (ADU), detached accessory structures, or floating homes (individual or in a moorage). Use this form if your dwelling unit is in a structure with 1 & 2 dwelling units, even if you are part of a multi-dwelling development (assortment of buildings on one site that may also include a condominium declaration). If your dwelling unit is located in a structure with 3 units or more then you must use the multi-dwelling structure application.

APPLICANT: Complete all sections below that apply to the proposal. Please print legibly.

Address of Accessory Short-Term Rental _____

City_____ State_____ Zip Code_____

Application Type: ❑ New ❑ Renewal

Pursuant to City Code 33.207.040.C.2.a, a Type A Accessory Short-Term Rental permit application must include notarized signatures by the property owner (or authorized agent), resident, and operator.

If the listed property owner is other than an individual:
In order to verify property owner or property owner's authorized agent signature authority, please attach all necessary documentation to verify signing authority for property owner information as listed in the county assessment and taxation records for the property. Necessary documentation may include business registry information, articles of incorporation, letters of authorization, or other documents or instruments providing signature authority for the individual signing the Type A Accessory Short-Term Rental Permit on behalf of the listed property owner (individual, organization, other business entity type).

Please note that Home Owner Association approval or signatures are not required for declared condominiums. Only the listed condominium owner is required to provide property owner signature authorization. Please consult all applicable Home Owner Association bylaws or other codes, covenants, and restrictions that might apply to a declared condominium.

Property Owner Name: _____

Property Owner Signature _____

Mailing Address _____

City_____ State_____ Zip Code_____

Telephone (Contact Number) _____Email _____

Notary Acknowledgement Certificate

State of_____County of_____

This record was acknowledged before me on _____, 20____

by _____

_____

Notary Public - State of _____

Resident Name (if not property owner): _____

Resident Signature _____

Mailing Address _____

City_____ State_____ Zip Code_____

Telephone (Contact Number) _____Email _____

Notary Acknowledgement Certificate

State of_____County of_____

This record was acknowledged before me on _____, 20____

by _____

_____

Notary Public - State of _____

Designated Operator (if not resident): _____

Operator Signature _____

Mailing Address _____

City_____ State_____ Zip Code_____

Telephone (Contact Number) _____Email _____

Notary Acknowledgement Certificate

State of_____County of_____

This record was acknowledged before me on _____, 20____

by _____

_____

Notary Public - State of _____

Description of Accessory Short-Term Rental

Describe the operation and the number of (1 & 2) bedrooms (1 or 2) that will be rented to overnight guests. Please include information such as:

Which rooms will be used as a short term rental; how long do you anticipate rentals to be for (2 days, a week, week days or mostly weekends); will you be using cleaning services or a management company to handle reservations; what time will be your guests generally check in/out; where will guests park their vehicle(s); and, will there be time restrictions on use of yard(s) or outdoor space?

_____

_____

_____

_____

Bedroom Inspections

There are two types of inspection requirements that apply to ASTR Permit approval. A BDS inspection is required for the initial permit approval and then every six years. Renewal applications (required every two years) are subject to self-certification requirements by the resident.

Please indicate the type of inspection required and complete the appropriate section below.

❑ Initial Inspection (and every 6 years)

The Bureau of Development Services must verify that each bedroom to be rented to overnight guests:

1. Met the Building Code requirements for a sleeping room at the time it was created or converted;
2. Has a smoke detector that is interconnected with a smoke detector in an adjacent hallway, common area, or immediate vicinity of sleeping rooms; and
3. Is located on the floor of a dwelling unit equipped with a functioning carbon monoxide alarm. Carbon monoxide alarms shall be located in each bedroom or within 15 feet outside of each bedroom door. If the dwelling unit does not have carbon monoxide source, then a carbon monoxide alarm is not required.

***A $97 reinspection fee will be assessed if the required smoke detectors and carbon monoxide alarms are not installed.**

List the location of the bedrooms you wish to have inspected for compliance with the requirements listed above (Note: You may not have overnight guests in more than 2 bedrooms at any time.)

Bedroom 1 _____

Bedroom 2 _____

Bedroom 3 _____

Bedroom 4 _____

The ASTR inspection will be limited to the three inspections items above. The inspection will not evaluate the exterior or interior conditions of the home for compliance with other building code or property maintenance standards. However, certified building inspectors have an obligation to act on and pursue correction of imminent safety hazards for the protection of occupants and overnight guests. Examples of imminent safety hazards are exposed live electrical wires observed during the inspection of the requested bedrooms or an incident of tripping or falling due to hazardous and non-compliant stairs leading to the bedrooms. These types of imminent hazards must be addressed prior to approving the Type A accessory short-term rental permit. Due to this issue, property owner signature is required below to authorize the requested ASTR bedroom inspection.

I, the undersigned property owner, request an inspection of my property located at:

_____

I understand that should imminent safety hazards or illegal bedrooms be found to exist in the building or on the premises, they will be cited as violations and I will be required to correct the conditions regardless of the status of this permit application. I also understand that if the violations found are not corrected within thirty (30) days of the date of a violation letter, I may be subject to a monthly code enforcement fee until the violations are corrected and the property is re-inspected and approved by the Bureau of Development Services.

Date this _____day of _____, 20_____

Signature of property owner _____

❑ Self-Certification (intervening years – or years 2, 4, 8, 10, 14, etc)

The renewal will not be accepted unless the resident agrees to these terms by initialing each of them.

_____ I certify that any changes to the bedroom(s) I am renting have been made compliance with applicable building, electrical, plumbing, and mechanical permit requirements, since my last BDS bedroom inspection.

_____ Each bedroom being rented has a smoke detector that is interconnected with a smoke detector in an adjacent hallway, common area, or immediate vicinity of sleeping rooms.

_____ Each bedroom is located on a floor equipped with a functioning carbon monoxide alarm if the dwelling unit has a carbon monoxide source. Carbon monoxide alarms shall be located in each bedroom or within 15 feet outside of each bedroom door.

With my signature below, I attest that each of the above initialed items is true, and I agree to each of these terms. Violations of any of the above initialed terms will be enforced by the Bureau of Development Services pursuant to Chapter 3.30 and Title 22 Hearings Officer of the Portland City Code.

Resident Signature_____Date_____

Neighborhood Notice

- Mail or deliver copies of the Neighborhood Notice Neighborhood Notice and General Regulations to all residents and property owners as shown on the figure on the Neighborhood Notice.
- Mail or deliver a copy of the Neighborhood Notice and General Regulations to the Neighborhood Association and District Coalition of Neighborhoods where your short-term rental is located. For the name and address of your neighborhood association, contact the Office of Neighborhood Involvement (ONI) at 503-823-4519 or http://www.portlandoregon.gov/oni/index.cfm?c=28386
- Attach a copy of the Neighborhood Notification Letter with this application.

Addresses of adjacent properties notified:

_____ _____

_____ _____

_____ _____

_____ _____

Name of Neighborhood Association notified: _____

Name of District Coalition of Neighborhood notified: _____

Responsibility Statement

_____ I will occupy the residence where I will be offering short-term rentals for at least 270 days (9 months) during each calendar year.

_____ I will rent a maximum of ____ bedrooms to overnight guests.

_____ I will maintain a guest log book that includes the names and home addresses of guests, guest's license plate numbers if traveling by car, dates of stay, and the room assigned to each guest.

_____ I have reviewed the accessory short-term rental general regulations on the back of the Neighborhood Notice and agree to operate my accessory short-term rental in compliance with the regulations.

_____ I have reviewed, in its entirety, the accessory short-term rental program information on the BDS website, http://www.portlandoregon.gov/bds/astr

_____ If I assign a designee to operate my short-term rental, I will provide them with the City's regulations and ensure the observance of these regulations by my designated operator.

_____ I will include my accessory short-term permit number in all advertising and post it in the bedroom(s) with the short-term rental.

_____ I will register my short-term rental business with the City of Portland Tax Revenue Bureau and will submit the appropriate transient lodging taxes.

Failure to comply with the regulations in Chapter 33.207 may result in a revocation of this permit and the resident will not be able to reapply for an accessory short-term rental permit for two (2) years.

_____

Resident Signature Date

_____

Operator Signature Date