



1 & 2 Dwelling Structure Type A Accessory Short-Term Rental (ASTR) Permit NEW 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 New 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 (www.oregon.gov/ODOT/DMV/pages/driverid/index.aspx#id) for more information.
NOTE: required identification is not allowed to include a separate mailing address unless it is a PO or PMB address.
- Payment for Type A ASTR Permit Fees
 - Initial application fee - \$65.00
 - Note that if the permit is randomly selected for a required BDS inspection an additional inspection fee of \$123.20 (\$110+12% State surcharge) is required.

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
Property Compliance Division
1900 SW 4th Avenue, Suite 5000
Portland, OR 97201**

In Person: Applications with payments by credit card or cash must be submitted in person:
Property Compliance Division, 2020 SW Fourth Ave, Ste 650, Monday - Friday, 8:00 am to 4:30 pm.

Application Review

After your application has been received, BDS staff will review your application. Your application will either be approved and a permit mailed to you or you will be contacted if your application is incomplete or if your permit is selected for a random BDS inspection. Please allow a minimum of three 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 Property Compliance Division at (503) 823-2633.



1 & 2 Dwelling Structure

NEW 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

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 _____

Complete ONLY if Resident is NOT the Property Owner

Resident Name _____

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 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 Requirements / Inspections

In order for the Type A permit to be approved, BDS must verify that each bedroom to be rented to overnight guests meets the requirements of PCC 33.207.040.B.4 (please visit [What is the inspection Process, www.portlandoregon.gov/BDS/article/518138](http://www.portlandoregon.gov/BDS/article/518138)) BDS will verify that the bedroom requirements are met through self-certification and random permit inspections.

Self Certification – Prior to issuance of a Type A Accessory Short-Term Rental Permit, **the applicant must certify and initial the following requirements.**

_____ I certify that each bedroom being rented for overnight guests met the building code requirements for a sleeping room at the time it was created or converted.

_____ I certify that each bedroom being rented for overnight guests has a smoke detector that is interconnected with a smoke detector in an adjacent hallway, common area, or immediate vicinity of sleeping rooms.

_____ I certify that each bedroom being rented for overnight guests 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 _____

Permit Inspections – 10% of all Type A ASTR permit applications will be randomly selected for on-site inspections by BDS to verify compliance with the bedroom requirements of PCC 33.207.040.B.4.a-c, prior to permit issuance. Permits randomly selected for an on-site inspection are subject to additional permit fees.

***A \$110 reinspection fee will be assessed if the required smoke detectors and carbon monoxide alarms are not installed. It will also be charged if it is determined that the sleeping room(s) were not legally created or converted.**

List the location of the bedrooms you will rent to overnight guests
(Note: You may not have overnight guests in more than 2 bedrooms at any time.)

Bedroom 1 _____
Bedroom 2 _____
Bedroom 3 _____
Bedroom 4 _____

PROPERTY OWNER MUST SIGN FOR POSSIBLE RANDOM INSPECTION

The ASTR inspection will be limited to the three bedroom requirements self-certified 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**, agree to an inspection of my property (if randomly selected) located at:

Site Address: _____

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_____

Property Owner Name _____

Signature of Property Owner _____

