



CRESTED BUTTE SOUTH
PROPERTY OWNERS ASSOCIATION, INC.
61 TEOCALLI ROAD, CRESTED BUTTE, CO 81224
PHONE (970) 349-1162, WEBSITE: www.cbsouth.net, FAX (970) 349-1163

Last Name

License No.

2024 Short Term Rental Application

Please complete all required information, read and sign/date the attached safety checklist, and affidavit.
Renewal of license will be required annually. An annual \$400.00 application fee applies.

GENERAL INFORMATION

Owner Name: _____
Mailing Address: _____
Main Phone: _____ Alt. Phone: _____
Email address: _____

RENTAL PROPERTY INFORMATION

Property Street Address: _____
Please circle: Entire house Private room Apartment/Condo
Number of Bedrooms: _____ Number of dedicated parking Spaces: _____

RESPONSIBLE PARTY INFORMATION

Representative Name (if not owner): _____
Company Name: _____
Main Phone: _____ Alt. Phone: _____
Email address: _____

ADMINISTRATIVE USE ONLY

Application received by: _____ Date: ____/____/2024
Application fee amount collected: _____ Check no. _____ Cash _____
Permit issued (circle one): NEW RENEWAL



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| |
|--------------------|
| <u>Last Name</u> |
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2024 Short Term Rental Affidavit

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|--|
| Owner's Name(s): _____ STR Property Address: _____ Phone Number: _____ |
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By signing this Affidavit, I represent that all information contained in this application is true and correct to the best of my knowledge and acknowledge and agree to abide by the requirements and restrictions of the CB South POA, as well as all state and local regulations.

- The rental of the property herein described is permissible under all applicable local zoning and the Gunnison County Land Use Resolution and any covenants and restrictions imposed by any owners' association with authority over the property.
- I understand and acknowledge that I am responsible for any violations committed by my renters, including the payment of any fines imposed because of said violations.
- As required under Colorado state statute, I have or will obtain a state sales tax license and will promptly remit all applicable taxes in conformance with the state and local law.
State Tax License number: _____
 My property is managed by an online rental marketplace who is responsible for remitting taxes.
- I agree that the CB South POA does not inspect rental units for conformance with applicable building codes prior to occupancy, that I am responsible for maintaining the property for health and safety, and to indemnify, defend, and hold harmless the CB South POA from any action resulting from damage, loss, injury, including death, of any occupant of the rental property herein described.
- I affirm that the identified property was rented short term for a total of _____ rental days during the previous calendar year.
- I have read and understand the requirements, restrictions, and standards of CB South POA and shall comply therewith.

By signing below, I(we) agree to the following: A Short-term Rental License will be issued after the application has been reviewed and approved in accordance with CB South POA Policy regarding Short Term Rentals. Specific terms and conditions may be included in the permit. All licenses will be issued to the owner(s) of the property. A change in ownership requires the new property owner to apply for a new license. Short-term rental licenses require annual renewal.

Printed name, Owner 1: _____ **Signature:** _____

Printed name, Owner 2: _____ **Signature:** _____

Date: ___/___/2024