

Checklist

Accessory Home Share Permit

An accessory home share permit applies when a property owner would like to have a short-term rental, and plans to reside at the property during the rental period. A maximum of 4 guests can stay 1-29 nights. This process does not apply for other short-term rentals, including vacation dwelling units and accessory vacation dwelling units, which require an Interim Use Permit.

Starting the Application Process

- Review information on the Short-Term Rental web site, including information about building code information and Frequently Asked Questions.
- Submit your application materials to Construction Services, Room 100 City Hall. Your application must include the following:
 - Application Cover Sheet and Applicable Fee
 - A site plan indicating location of parking spaces
 - A floor plan of the dwelling unit identifying which room(s) will be rented
 - Signed affidavit for verification of owner occupancy during guest rental
 - Life Safety Request Inspection Application and inspection fee. **If renewal, submit directly to Life Safety Division.**

After Submitting Your Application

Construction Services will review your application and contact you when the permit is approved.

You may need to obtain other licenses and permits from other State and City offices. Please see the Frequently Asked Questions for details.

Note that other City codes may apply to your project. Please be aware of any applicable Building Code (Construction Services Division), Fire Code (Life Safety Division), and stormwater/engineering (Engineering Division) regulations. The zoning approval may be only the first step in a several step process.

AFFIDAVIT

Date: _____

Purpose: Verification of Owner Occupancy during guest rental

Address: _____ Parcel ID#: _____

(PRINT FULL NAME) _____ personally came and appeared before me, the undersigned Notary, the within named (PRINT FULL NAME) _____ who is the owner and occupant of the above address makes this his/her statement and General Affidavit upon oath and affirmation of belief and personal knowledge that the following matters, facts and things set forth are true and correct to the best of his/her knowledge:

- I am currently the whole or partial owner of the above listed address and I reside at the address and will abide by the requirements for owner occupancy during the rental of the property as an accessory home share listed in UDC Sec. 50-20.5.G.

Dated this _____ day of _____, 20__

Signature of Affidavit Petitioner: _____

Sworn to subscribed before me, this _____ day of _____, 20__

Signature of Notary Public: _____



Life Safety Division • City of Duluth Fire Department

615 West First Street • Duluth, MN 55802

Phone: 218-730-4380 • Fax: 218-730-5902

Email: lifesafety@duluthmn.gov • Website: www.duluthmn.gov/fire/

Request Inspection Application- Vacation Rental - \$100.00 fee

Property Address:

Type of Property:

Single Family Duplex Multi-Dwelling: specify # of units: _____

Applicant Information:

Name(s): _____

Address: _____

Preferred Phone: _____ Alternate Phone: _____

Email Address: _____

Agent/Representative Information (if different than above):

Name(s): _____

Address: _____

Preferred Phone: _____ Alternate Phone: _____

Email Address: _____

Property Owner Signature: _____ Date: _____

Property Owner Name (Printed) : _____