



Town of St. Johnsbury - Long-term Rental Unit Registration Form

A current registration form should be returned, with all applicable fees, on or before June 30 of each year, to the zoning administrator, Town of St. Johnsbury, 51 Depot Square, St. Johnsbury, VT 05819. A new owner must file an updated form within 30 days after the date of transfer of ownership

1. PROPERTY IDENTIFICATION

Address: _____

Owner: _____

Mailing Address: _____

Phone: _____ email: _____

Parcel ID _____

2. MANAGING AGENT IDENTIFICATION

Name: _____

Mailing Address: _____

Phone: _____ email: _____

3. EMERGENCY CONTACT IDENTIFICATION

Name: _____

Mailing Address: _____

Phone: _____ email: _____

4. Rental Unit Information

Lodging, Boarding, Hotel, Motel, Multi-Family, Single Family, Extended Stay, Other _____

Total number of long-term rental units at this address: _____

Units off the market _____ Units owner occupied _____ Other _____



Town of St. Johnsbury - Long-term Rental Unit Registration Form

A current registration form should be returned, with all applicable fees, on or before June 30 of each year, to the zoning administrator, Town of St. Johnsbury, 51 Depot Square, St. Johnsbury, VT 05819. A new owner must file an updated form within 30 days after the date of transfer of ownership

5. Registration Fee Payment is payable to the "Town of St. Johnsbury"

Total Amount Due: \$35.00 x # of units _____ Amount Enclosed _____

6. Failure to register Failure to register a building or portion thereof used for long term rental for 30 or more days in a calendar year is subject to penalties pursuant to the St. Johnsbury Code of Civil Ordinance, Chapter 6, Housing Rental Unit Registration. A violation of this ordinance shall be enforced in accordance with the provisions of 24 V.S.A. §§ 1974a and 1977 et. seq. Each day the violation continues shall constitute a separate violation.

7. Exemptions The following properties are be exempt from registration, fees and/or inspections: (1) A unit that is currently maintained as part of a nursing, rest or convalescent home licensed and inspected by the state; (2) Owner occupied single family home; (3) A rental unit that is occupied for less than thirty (30) consecutive days in a calendar year; (4) A rental unit that is occupied less than thirty consecutive (30) days by the same tenant(s) and the rental unit is not the current primary residence of a tenant. An owner-occupied unit of multi-family dwelling is exempt from fees, but must still register and be inspected for fire and life safety requirements as adopted by the Vermont Department of Safety.

8. Owner or agent's signature I/we do hereby certify the information provided is true and accurate to the best of my/our knowledge: _____.

Print name here: _____.

Provide the following information for every rental unit in the building/complex.

- 1. Unit ID _____ Square Footage _____ No. of sleeping rooms _____ Occupied Y/N _____ ADA Y/N _____
- 2. Unit ID _____ Square Footage _____ No. of sleeping rooms _____ Occupied Y/N _____ ADA Y/N _____
- 3. Unit ID _____ Square Footage _____ No. of sleeping rooms _____ Occupied Y/N _____ ADA Y/N _____
- 4. Unit ID _____ Square Footage _____ No. of sleeping rooms _____ Occupied Y/N _____ ADA Y/N _____
- 5. Unit ID _____ Square Footage _____ No. of sleeping rooms _____ Occupied Y/N _____ ADA Y/N _____
- 6. Unit ID _____ Square Footage _____ No. of sleeping rooms _____ Occupied Y/N _____ ADA Y/N _____
- 7. Unit ID _____ Square Footage _____ No. of sleeping rooms _____ Occupied Y/N _____ ADA Y/N _____
- 8. Unit ID _____ Square Footage _____ No. of sleeping rooms _____ Occupied Y/N _____ ADA Y/N _____
- 9. Unit ID _____ Square Footage _____ No. of sleeping rooms _____ Occupied Y/N _____ ADA Y/N _____
- 10. Unit ID _____ Square Footage _____ No. of sleeping rooms _____ Occupied Y/N _____ ADA Y/N _____