



TOWN OF DILLON

275 Lake Dillon Drive | PO Box 8, Dillon CO 80435
(970) 468-2403

APPLICATION FOR SHORT TERM RENTAL LICENSE - \$50.00

PROPERTY ADDRESS:

PROPERTY COMPLEX: UNIT #:

PROPERTY OWNER NAME(S):

MAILING ADDRESS:

CITY: STATE: ZIP:

PHONE: EMAIL:

NAME OF PERSON / ENTITY PREPARING TAX RETURN:
PHONE: EMAIL:
SALES TAX LICENSE NUMBER:
FILING FREQUENCY: MONTHLY QUARTERLY ANNUAL
Filing frequency is determined by the Colorado Department of Revenue.
SELECT THE HOSTING PLATFORM(S) OR WEBSITE(S) THAT THE PROPERTY IS ADVERTISED ON:
AIR B&B VRBO HOMEAWAY TRIPADVISOR FLIPKEY VACASA
OTHER: OTHER:
RESPONSIBLE AGENT NAME:
PHONE: EMAIL:
ADDITIONAL PHONE/EMAIL:

PARKING PLAN INFORMATION: (please provide specific information on parking available for guests)

TRASH/RECYCLING INFORMATION: (please provide specific information on trash and recycling for guests)

I (we) certify that all information provided is accurate and that I (we) have inspected this property and that it complies with all applicable laws and codes, and that all smoke detectors, carbon monoxide detectors and fire extinguishers are installed and operable.

When this form is completed and signed return to str@townofdillon.com. Payment can be made online at https://www.townofdillon.com/i-want-to/pay-your-bill or by check mailed to the Town of Dillon by April 1, 2019. For assistance email str@townofdillon.com or call (970) 468-2403.

OWNER SIGNATURE PRINTED NAME DATE

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