

Short-Term Rental Process

1. **ALL** Fees must be paid at the time the application is submitted to the Town Clerk.
2. **All** applications will be reviewed by the Zoning Officer for Zoning **compliance** and **completeness** before being forwarded to the appropriate Board.
3. **Incomplete** Applications **Will NOT** be forwarded.

You should have the following documents to turn in to the Town of Urbana:

- Compliance Checklist
- Contact Information Form
- Short-term Rental Permit Application
- Special Use Permit Application
- Concept Review Application
- SEQR (Short Environmental Assessment Form)
 - Part 1- Project Information

If you have any questions, please contact the zoning office

Marvin Rethmel – 607-569-3743 Ext. 5

Monday 9:00 am-4:00 pm and/or Friday 9:00 am-4:00 pm

COMPLIANCE CHECKLIST

_____ COMPLETED BY THE APPLICANT TO [SUBMIT WITH THE APPLICATION](#),AND WILL ALSO BE.....

_____ COMPLETED SEPARATELY BY THE CODE ENFORCEMENT OFFICER FOR ASSESSMENT OF THE APPLICATION.

Address of proposed short-term rental Property owner

Check below as indicated whether the item “Complies” or “Does NOT comply.”

☐ = Complies

or

☐ = Does NOT comply

Make any important notations about issue(s) of deficiency/non-compliance at the end of this document.

A. Property requirements

- ☐ (1) Property must comply with and meet all current *NYS Uniform Building Codes*.
- ☐ (2) There shall be one working smoke detector in each sleeping room and one additional smoke detector on each floor. Carbon monoxide detectors shall be installed as required by the New York State Uniform Fire Prevention and Building Code.
- ☐ (3) Evacuation procedures must be posted in each sleeping room to be followed in the event of a fire or smoke condition or upon activation of a fire or smoke detecting or other alarm device.
- ☐ (4) There shall be an ABC fire extinguisher on each floor and in the kitchen. Fire extinguishers shall be inspected prior to a renter occupying the property and no less than monthly by the permit holder(s) to ensure each contains a full charge. A record of the date inspected initialed by the permit holder shall be maintained and made available to the Code Enforcement Officer upon request.
- ☐ (5) The house number shall be located both at the road and on the dwelling unit so that the house number is clearly visible from both the road and the driveway.
- ☐ (6) Exterior doors shall be operational and all passageways to exterior doors shall be clear and unobstructed.
- ☐ (7) Electrical systems shall be in good operating condition, labeled, unobstructed and shall be visible for the Code Enforcement Officer during the permitting process. Any defects found shall be corrected prior to permit issuance.
- ☐ (8) All fireplaces shall comply with all applicable laws and regulations.

- ☐ (9) The property must have a minimum of one (1) off-road parking space for every bedroom shown on the floor plan included with the application.
- ☐ (10) Maximum occupancy for each Short-Term rental unit shall not exceed two (2) people per bedroom shown on the floor plan included with the application.
- ☐ (11) The maximum occupancy shall be defined by the capabilities of the waste water treatment system this system shall govern the occupancy 2 people per bedroom. This follows the State guide lines for Onsite Waste Water Treatments Systems
- ☐ (12) A septic system at the property must meet all state requirements.
- ☐ (13) The septic system must have been pumped within the past four years and proof of pumping and satisfactory inspection by a qualified septic disposal firm shall be available to the Code Enforcement Officer. Once a Short-Term Rental permit is issued, the septic system must be pumped at least once every four years.
- ☐ (14) The water supply to the property must meet all State requirements.
- ☐ (15) One sign identifying the Short-Term Rental shall be allowed measuring no more than two square feet on a side. The sign may be double-sided but not internally lighted. The location, design and dimensions of the sign shall be reviewed and approved by the Code Enforcement Officer prior to issuance of the permit. If signage is desired after a permit has been issued, the Short-Term Rental permit holder must submit a request for review and approval to the Code Enforcement Officer prior to installation.

B. Insurance standards

- ☐ All applicants and permit holders must provide "Evidence of Property Insurance" and a "Certificate of Liability Insurance" indicating the premises is rated as a Short-Term Rental and maintain such insurance throughout the Term of the Short-Term Rental permit.

C. Garbage Standards:

- ☐ Provisions shall be made for weekly garbage removal during rental periods.

- ☐ Garbage containers shall be secured with tight-fitting covers at all times to prevent leakage, spilling or odors, and
- ☐ placed where they are not clearly visible from the road except at approximate pick-up time.

D. Rental Contract - All applicants and permit holders must have a rental contract, which includes the following:

- ☐ (1) Maximum property occupancy; ☐ (2) Maximum on-site parking provided; and ☐ (3) Good

Neighbor Statement Stating:

- ☐a. The Short-Term Rental is in a residential area in the Town of Urbana and that renters should be considerate of the residents in neighboring homes.
- ☐b. Guests are requested to observe quiet hours from 11:00 p.m. – 7:00 a.m. pursuant to Chapter 71-2-(B) Prohibited acts; hour of repose.
- ☐c. All renters will be subject to New York Penal Law §240.20 or any successor statute regarding disorderly conduct.
- ☐d. Littering is illegal; and
- ☐e. Recreational campfires must be attended.

SIGNAGE:

The following are *prominently displayed inside and near the front entrance* of the Short-Term Rental Property:

- ☐ Short-Term Rental permit;
- ☐ Maximum occupancy limit;
- ☐ Maximum parking;
- ☐ Contact form; and
- ☐ Standards.

Notations regarding any issue(s) of deficiency/non-compliance:

Print name of ☐ Owner/Applicant - or - ☐ Code Enforcement Officer

Signature of ☐ Owner/Applicant - or - ☐ Code Enforcement Officer

/ /
Date

Short-Term Rental Property

Contact Information

Per Urbana Town Code

Chapter 105 -73 maximum occupancy limit, maximum parking, **contact form** and standards **shall be prominently displayed inside and near the front entrance of the Short-Term rental.**

Property Owner

Address

City

ST

Zip

() -
Phone

or () -
(Ext.) Cell phone

E-mail address

Property Owner

Authorized Managing Agent (_____)

Address

City

ST

Zip

() -
Phone

or () -
(Ext.)

Alternate phone

(Ext.)

E-mail address

APPLICATION FOR A SHORT-TERM RENTAL PERMIT

TOWN OF URBANA

IMPORTANT — This application does NOT contain all information you need to know and address as an applicant/manager of a Short-Term Rental Property in the Town of Urbana. You are advised to thoroughly review Urbana Town Code Section 105 Article IX, it is available in the Town Clerk's office or on the towns website at www.townofurbana.com.

Address of the proposed short-term rental:

Name: _____

Address: _____

Owners address If different from the STR Property:

Name: _____

Address: _____

Phone Number: _____

The two boxes immediately below are to be checked only if this is a first-time application and if commitments were made prior to the enactment of this local law.

☐ First time Application.

☐ Prior commitments before enactment of this local law.

Please verify prior commitments on a separate sheet of paper.

***All portions of this application are required and must be completed.**

***Applications that fail to provide sufficient information shall be declined.**

SHORT-TERM RENTAL - FLOOR PLAN

Instructions:

Per town Code Chapter 105, Article IX Short-Term Rentals

(6) An accurate suitable floor plan for each level of the dwelling that can be occupied measuring at least 8.5 inch by 11 inch, drawn to scale and certified by the applicant. The floor plan does not need to be prepared by a professional, but must include the following:

- a. The location of buildings and required parking.
- b. Basement — location of house utilities and all rooms including bedrooms, windows, exits and any heating/cooling units.
- c. First floor — Dimensions all rooms including bedrooms, windows, exits and any heating/cooling units.
- d. Second floor — Dimensions all rooms including bedrooms, windows, exits and any heating/cooling units.
- e. Attic (if present) — No bed rooms in attics unless building is sprinklered, and waste water treatment system is designed to include these rooms.

INCLUDE and sign the following attestation with each of these and all drawings:

I certify that the accompanying dwelling Plot Diagram and Floor Plans are complete and accurate representations of the property in this application.

Signature of Applicant: _____ Date: _____

SHORT-TERM RENTAL - PLOT DIAGRAM



Instructions: Clearly and distinctly 'locate all buildings and, parking area(s) plus their dimensions, whether existing or proposed, and indicate all setback dimensions from property lines. Give identifying 'information or deed description; show all easements, street names, and adjacent property owner names; and show well, septic, and leach field locations. Show all bodies of water, creeks, and/or shorelines, indicate whether it is an interior or corner lot. Also indicating "North" helpful. Use additional sheet(s) for detail if necessary.

By signing this application, I/We attest that I/we

- 1...have read and comprehend all the requirements and standards contained in the Town of Urbana Code chapter 105, article IX, Short- Term rentals;
- 2...have included an accurate and suitable floor plan for each level of the dwelling that can be occupied;
- 3...have certified that the accompanying floor plan is an accurate facsimile of the dwelling;
- 4...have included a plot diagram demonstrating adequate off- road parking spaces;
- 5... agree, as a condition to the issuance of this permit, that said short term rental shall conform with all laws, and ordinances of the town and the state of New York Uniform Fire prevention and building code of New York State, and all other applicable laws, codes, and regulation;
- 6...authorize the Town Code Enforcement Officer to inspect the property to ensure compliance with all requirements and standards contained within Town and State Law;
- 7...confirm the present and ongoing compliance with the Towns Short-Term Rental Standards;
- 8.... will limit lease periods to a maximum of 30 days;
- 9....certify that the contact person (the owner or the owner's designee) shall be responsible and authorized to act on the owner's behalf and shall promptly remedy any violation of the standards outlined in Town Law and shall respond to any correspondence or concern from the Town Code Enforcement officer within 24 hours; and
10. attest that none of the owners of the subject property have had a Short-Term rental Permit revoked within the previous year for any rental properties owned individually or together with others.
11. submit waste water treatment system inspection.

Signature(s) of ALL owners or their designated agents

<input type="checkbox"/> _____ / / Property Owner - OR - <input type="checkbox"/> Authorized Agent (<u>IF</u> designated) Date	<input type="checkbox"/> _____ / / Property Owner - OR - <input type="checkbox"/> Authorized Agent (<u>IF</u> designated) Date
<input type="checkbox"/> _____ / / Property Owner - OR - <input type="checkbox"/> Authorized Agent (<u>IF</u> designated) Date	<input type="checkbox"/> _____ / / Property Owner - OR - <input type="checkbox"/> Authorized Agent (<u>IF</u> designated) Date
<input type="checkbox"/> _____ / / Property Owner - OR - <input type="checkbox"/> Authorized Agent (<u>IF</u> designated) Date	<input type="checkbox"/> _____ / / Property Owner - OR - <input type="checkbox"/> Authorized Agent (<u>IF</u> designated) Date

Submit this signed application and applicable fee (check payable to the Town of Urbana or the exact cash amount, please) to the Town of Urbana Clerk, 8014 Pleasant Valley Road Bath, New York 14810

- () FIRST TIME APPLICATION: FEE: _____
- () ANNUAL RENEWAL: FEE: _____
- () ANNUAL INSPECTION FEE. FEE: _____

OFFICIAL USE ONLY

\$ _____ / /

Fee Paid

Town Clerk's signature

Date

Tax Map ID # _____

District: AG, RES,

Adjacent property owners have been notified of this application via:
CEO's initials

post card

email _____ on _____
Date

Application reviewed by _____ ☐ NOT approved+ APPROVED

CEO's initials +Explain below

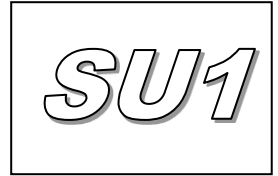
Code Enforcement Officer's signature

Date

Explanation if not approved:

Town of Urbana

PO Box 186, Hammondsport, New York 14840
TownClerk(607)569-3743 Codes Department (607) 569-3743 ext. 5



Special Use Permit Application

Please complete all sections and return to the Town Clerk.

1. Application [SU1] page 1
2. Sketch Map [SU1 Map] page 2
3. Narrative [SU1 Narrative] page 3

The undersigned hereby applies to the Planning Board for a Special Use Permit Pursuant to Section _____ of the Zoning Law of the Town of Urbana, Local Law # 1 of 1988, affecting the following described premises in the manner and on the grounds hereinafter set forth;

Name of Applicant: _____

Property Owner: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Existing Use: _____

Proposed Use: _____

Intended Usage:

Residential

Business

Industrial

I certify that the statements contained are true to the best of my knowledge and belief and that I will comply with all applicable regulations.

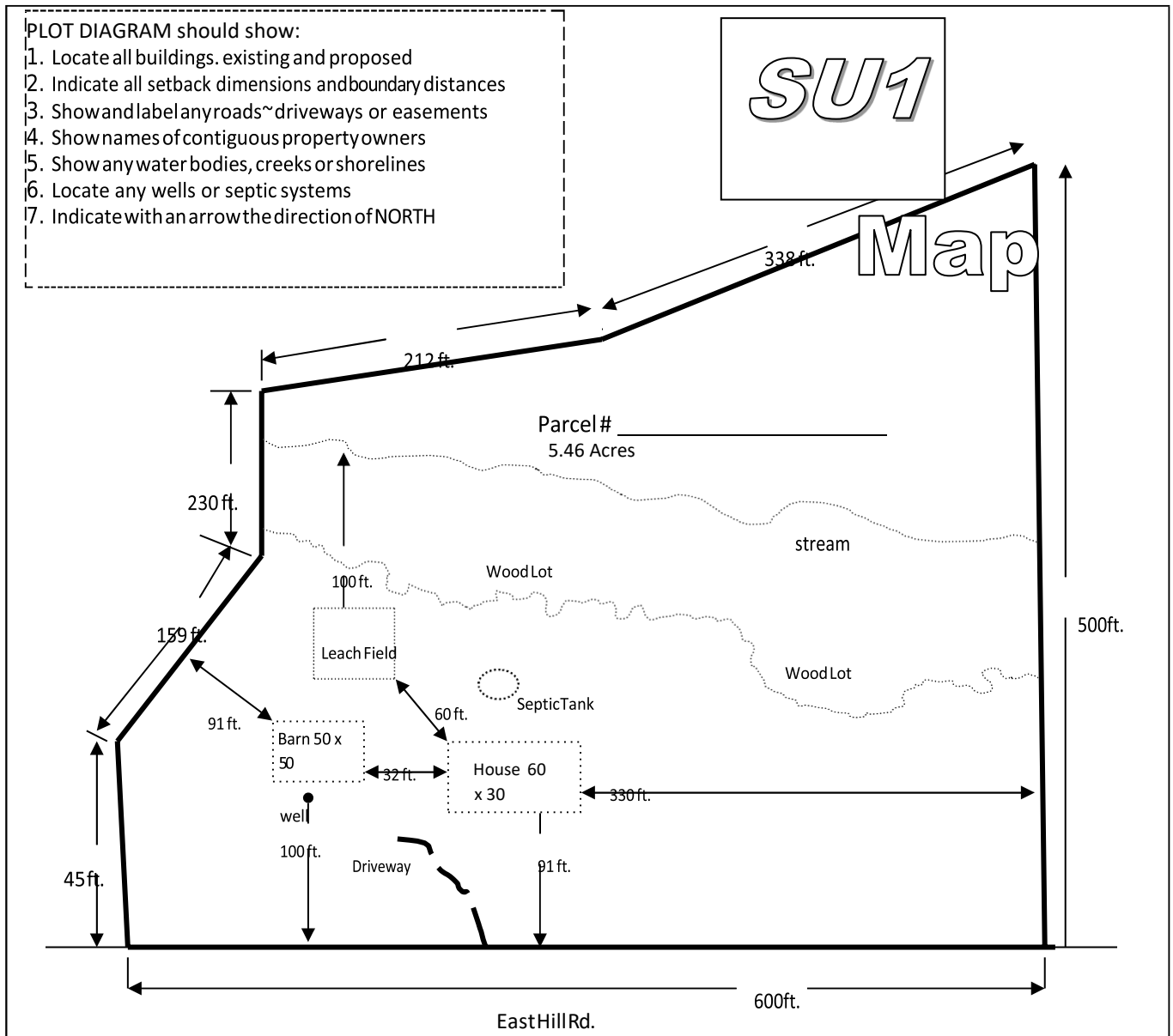
Signature of Applicant or Authorized Agent _____ Date: _____

Submit 6 copies of your completed application and any required fee to the Office of the Town Clerk.

Upon receipt of a completed application, including the required submissions, the Planning Board Secretary will schedule a hearing with the Planning Board and notify you by mail.

Sample-Special Use Permit Sketch Map- Plot Diagram

Note: An enlarged readable copy of a tax map or survey is often used as a basis for a sketch for a sketch map.



NOTE: PLEASE MODIFY SHAPE OF PROPERTY AS NECESSARY.

In an effort to assist you, the Town of Urbana Area & Bulk Regulations are provided below:

Zoning District	Minimum Lot Size		Lot Width (d)		Boundary Setback			% Lot Coverage
	Res.	N. Res.	Res.	N. Res.	Front	Side	Rear	
Agricultural	2 acres	2 acres	250'	250'	50'	20'	50'	20%
Residential	10,000 Sq.Ft.	10,000 Sq.Ft.	75'	75'	40'	10'	30'	25%
Residential(a)			50'	75'	15' (b)	10'	20'	25%
Business	NA	10,000 sq ft	NA	100'	35'	20'	20'	50%
Industrial		30,000 sq ft		200'	50'	25'	20'	35%
Flood Plain		1 acre		150'	50'	25'	50'	10%

Key: a = Keuka Lake Shoreline Lot

b = Distance from mean high-water to the principal building

c = Distance from the edge of the improved portion of roadway to building

d = Road frontage

TaxParcel#: _____

PO Box 186, Hammondsport, New York 14840
(607)569-3743 x-5



3. Written narrative that adequately describes the proposed Special Use. In reference to the Section of law this Special Use has been applied for, set forth exactly the interpretation that is claimed;

[illegible]

Office use only

Date Completed application received by CEO/ZEO _____ Permit Number _____

Tax Parcel # _____ Fee Owed _____ Date Paid _____

Town of Urbana

PO Box 186, Hammondsport, New York
1484014840 Zoning Department (607) 569-
3743 ext. 5 Email: Zoning@townofurbana.com

CR1

Concept Review Application

All changes or intensification of any land use activities within the Town of Urbana are subject to the Site Plan review procedure. The first step of the procedure is for the applicant to submit an application for Concept Review to the Town Clerk.

SECTION 1 ~ PROJECT LOCATION

Address _____

Tax Parcel Number _____

Existing Use _____ Proposed Use _____

SECTION 2 ~ OWNER

Name of Property Owner _____

Mailing Address _____

Contact Phone # _____

Email _____

SECTION 3 ~ Intended Use

☐ Residential ☐ Business ☐ Industrial

A Concept Review conference shall be held between the Planning Board and the applicant prior to the preparation and submission of a formal Site Plan Review. The intent of such a conference is to enable the applicant to inform the Planning Board of a proposal prior to the preparation of detailed site plan and for the Planning Board to review the basic site design concept, advise the applicant after potential problems and concerns and to generally determine the information to be required on the site plan. In order to accomplish these objectives, the applicant shall provide the following:

A detailed sketch map showing the locations and dimensions of existing and proposed principal and accessory structures, parking areas, access signs (showing distances to lot lines), existing and proposed vegetation, and other planned features; anticipated changes in existing topography and natural features; and where applicable, measures and features to comply with watershed and flood hazard regulations.

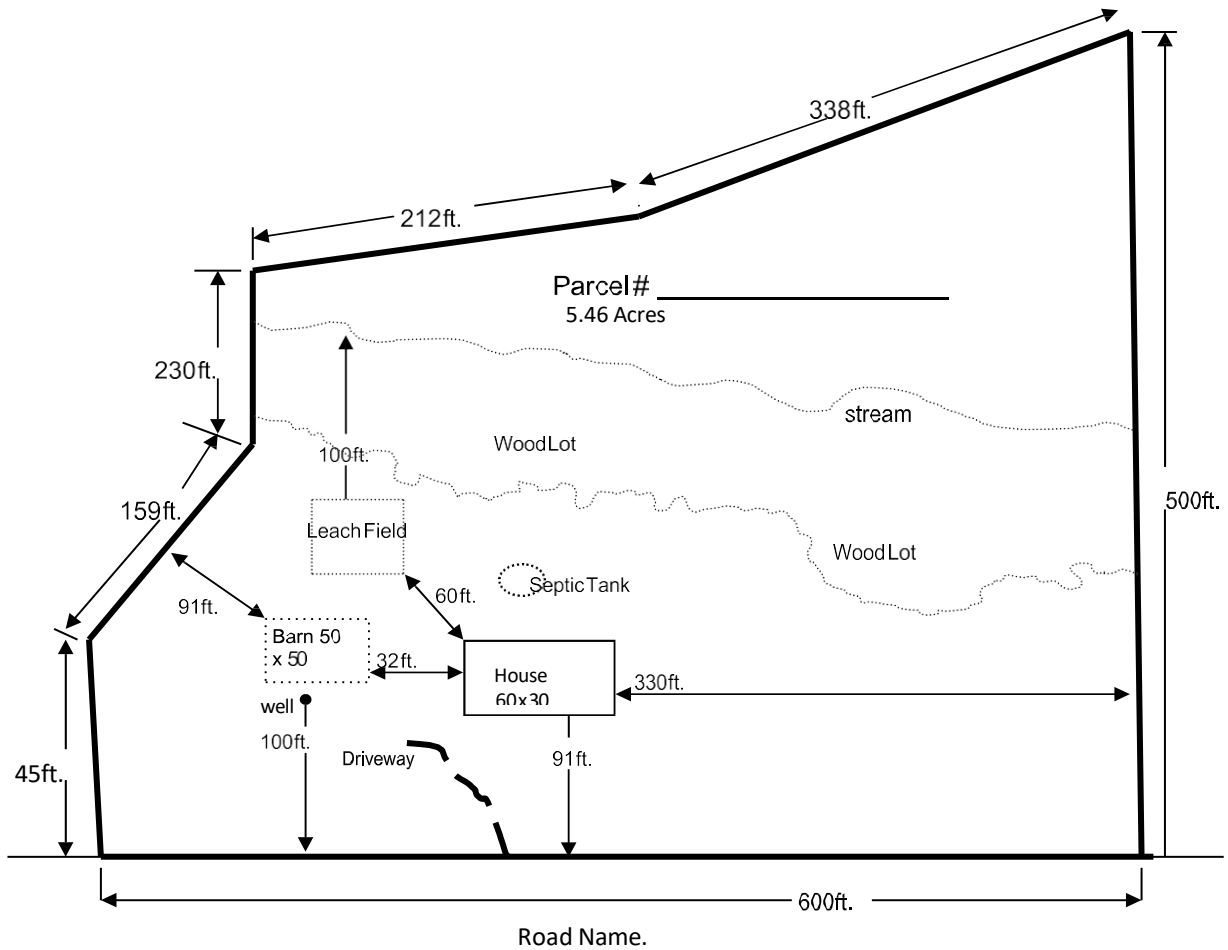
A reasonably specific written statement as to the proposed scope and extent of any proposed expansion or enlargement or increase in the intensity of use of any building or structure, land or buildings/structures and land area adjacent thereto.

Submit 6 copies of your completed application and any required fee the Office of the Town Clerk.

Upon receipt of a completed application, including the required submissions, the Planning Board will schedule a Concept Review Conference and notify you by mail, phone call, or email.

Sample—Concept Review Sketch Map

Note: An enlarged readable copy of a tax map or survey is often used as a basis for a sketch map.



In an effort to assist you, the Town of Urbana Area & Bulk Regulations are provided below:
Note: Code Enforcement can help identify your zoning district.

Zoning District	Minimum Lot Size		Lot Width (d)		Boundary Setback			% Lot Coverage
	Res.	N. Res.	Res.	N. Res.	Front ©	Side	Rear	
Agricultural	2 acres	2 acres	250'	250'	50'	20'	50'	20%
Residential	10,000 Sq.Ft.	10,000 Sq.Ft.	75'	75'	40'	10'	30'	25%
Residential(a)			50'	75'	15' (b)	10'	20'	25%
Business	NA	10,000 sq ft	NA	100'	35'	20'	20'	50%
Industrial		30,000 sq ft		200'	50'	25'	20'	35%
Flood Plain		1 acre		150'	50'	25'	50'	10%

Key: a = Keuka Lake Shoreline Lot

b = Distance from mean high-water to the principal building

c = Distance from the edge of the improved portion of roadway to building

d = Road frontage

Written narrative that adequately describes the proposed Concept Review.

CERTIFICATION

I certify that the statements herein contained are true to the best of my knowledge and belief and that I will comply with all applicable regulations.

Signature of Applicant or Authorized Agent _____ Date: _____

(Include letter of authorization if not applicant)

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
Name of Action or Project:			
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action:			
Name of Applicant or Sponsor:		Telephone:	
		E-Mail:	
Address:			
City/PO:		State:	Zip Code:
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?			NO
If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			YES
			<input type="checkbox"/>
			<input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:			NO
			YES
			<input type="checkbox"/>
			<input type="checkbox"/>
3.a. Total acreage of the site of the proposed action? _____ acres			
b. Total acreage to be physically disturbed? _____ acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres			
4. Check all land uses that occur on, adjoining and near the proposed action.			
Urban <input type="checkbox"/>	<input type="checkbox"/> Rural (non-agriculture)	<input type="checkbox"/> Industrial	<input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)
Forest <input type="checkbox"/>	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Aquatic	<input type="checkbox"/> Other (specify): _____
Parkland <input type="checkbox"/>			

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO <input type="checkbox"/>	YES <input type="checkbox"/>	N/A <input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?	<input type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____	<input type="checkbox"/>	<input type="checkbox"/>	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: r <input type="checkbox"/> <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> <input type="checkbox"/> Urban <input type="checkbox"/> Suburban			
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: <input type="checkbox"/> NO <input type="checkbox"/> YES	NO <input type="checkbox"/>	YES <input type="checkbox"/>	

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____ _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____ _____ _____	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: _____ Date: _____ Signature: _____		