



## SHORT-TERM RENTAL (Conditional Use Permit)

Please use the Town of Meeker Short-Term Rental Guide to help complete this form.

### FOR TOWN USE ONLY

Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_  
Fee: \_\_\_\_\_ Check #: \_\_\_\_\_ Received By: \_\_\_\_\_  
Date Accepted: \_\_\_\_\_ Accepted By: \_\_\_\_\_

### TO BE COMPLETED BY APPLICANT

#### Applicant Information

(If additional owners or applicants, please attach contact information to this application)

Name(s): \_\_\_\_\_  
Street address: \_\_\_\_\_  
Mailing address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

#### *Record Title Owner(s) of Property (if different from applicant)*

Name(s): \_\_\_\_\_  
Street address: \_\_\_\_\_  
Mailing address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

#### Property Information

Legal Description:

Lot/Block/

Subdivision

(If the property is in metes and bounds,  
please attach copy)

Lot

Block

Subdivision

Physical Address of  
the Property

Zoning District:

Rural Residential

Single-Family  
Residential

Mixed Residential

Mobile Home Park

Town Core

Highway Corridor

Industrial

Community  
Facilities

Planned Unit  
Development



Short-Term Rental Information

*Site Information and Parking Plan*

Does the applicant have a current or has applied for State and Lodging Tax license? *Provide a copy with the application.*

- Yes  No

What structure type will the proposed short-term rental be in?

- Single-Family Residence  Duplex  
 Accessory Dwelling Unit (ADU)  Mixed Use Residence  
 Multifamily Residence (apartment/condo/townhouse)

Will the full residential unit be rented?

- Yes  No

If no, describe the portion that will be rented and what percentage of the gross floor area will be rented.

Briefly describe your Short-Term Rental Parking Plan. (include off-street parking locations and plan to communicate with guests about additional parking and trailer parking locations).

Will the owner, or an Owner's Agent, be available within 20 minutes to manage the property during any periods the unit is rented?

- Yes  No

Owner's Agent Name: \_\_\_\_\_

Owner's Agent Phone: \_\_\_\_\_

What will the maximum occupancy for the proposed Short-Term Rental?

Do you have trash service in place for the proposed Short-Term Rental?

- Yes  No



*Fire and Safety Self Evaluation*

Do you have working fire extinguisher (#5 ABC mounted in the kitchen) at the proposed Short-Term Rental?

Yes  No

Do you have working carbon monoxide detectors at the proposed Short-Term Rental?

Colorado State Law mandates that carbon monoxide detectors must be within 15 feet of sleeping rooms.

Yes  No

Do you have working smoke alarms in each bedroom at the proposed Short-Term Rental?

Yes  No

Do all stairs have handrails?

Yes  No  N/A

Do all decks/porches that are 30 inches or more off grade have guardrails?

Yes  No  N/A

*Short-Term Rental Guest Information*

*Posting of Required Information at the Short-Term Rental (please attach)*

- Contact Information for the owner or responsible party
- Property Address
- Maximum number of guests
- Location of fire extinguishers
- A copy of Meeker Municipal noise code
- Parking and snow storage rules
- Trash disposal information
- How to sign up for Rio Blanco Alters
- Information on fire bans (link to Rio Blanco County Sheriff is acceptable)
- Map showing location where trailer and large vehicle parking is allowed

Indicate where the Guest Information will be posted in the proposed short term rental:



Additional Requirements

- Proof of ownership (deed, title insurance)  
*If the owner/s of the property is/are different from the applicant, then a notarized letter consenting to this proposal, signed by the owner/s of record, must be submitted with this application.*
- Legal description (Rio Blanco County Assessors Property Card)
- Short-Term Rental Permit Fee
- Map, site plan or plat/ILC
- Copy of draft Short-Term Rental Guest Information
- Proof of Insurance
- Copy of Lodging Tax License or application

Acknowledgement

*I hereby certify that the information provided in this application is true and correct to the best of my knowledge.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Co-Applicant

\_\_\_\_\_  
Date

**NOTE:** This Conditional Use request will require a Public Hearing with the Planning Commission and the Board of Trustees. The Planning Commission meetings are scheduled on either the 2nd or the 4th Mondays at 7:00 pm. Board of Trustees meeting are scheduled on either the 1st or 3rd Tuesdays at 7:00 pm. It is expected that the applicant/s or their authorized agent will attend each Public Hearing.

An incomplete application will not be accepted and will be returned to the applicant for completion and resubmittal. Please call Town Hall 970-878-5344 if you have any questions.

This application is only a request for review. Acceptance of the completed application does not constitute acceptance or rejection of the request. The applicant bears all risk for any action taken with respect to the property.

***Ex Parte Disclosure: Please note that it is inappropriate to personally contact any individual Board of Trustee or Planning Commission member while an application is pending. Such contact is considered ex parte communication and will have to be disclosed as part of the public hearings on the matter. If you have any concerns, you should contact staff, write a letter, or present your concerns at the public meeting so your comments can be made part of the record.***