Short Term Rental
Application Form

Before you apply:

- Please visit, Calgary.ca/shorttermrentals to find more information on rules, requirements and to estimate your fee
- Please note, this application form is only to be used for Short Term Rentals.
  - If you are applying for a Lodging House, please visit, the Calgary.ca/startbusiness to find more information on application requirements, estimate your fee and how to apply

SECTION 1: Who is applying?

Applicant Information

Applicant Name:	Company Name (if applicable):
Email:	Phone Number (during business hours):
Mailing Address:	
Country:	Province/State:
City:	Postal Code/Zip:

SECTION 2: Residential Rental Information

What is the address of the property for rent?

Address:	
City:	Postal Code/Zip:

Questionnaire

1	Is the above address your principal residence?	❍ Yes	❍ No	
2	Roll number*			
3	Do you own this residence?	❍ Yes	❍ No	
4	Does the property owner allow for rentals?	❍ Yes	❍ No	
5	What type of residence is this? (Select one that applies)			

❑ Apartment or Condo Unit ❑ House with a suite (Secondary Suite) ❑ Duplex/Triplex/Fourplex

❑ Single Family House ❑ House with a Coach or Laneway House (Backyard Suite) ❑ Townhouse

5.1	Is the Short Term Rental located in the Secondary Suite/Backyard Suite?	❍ N/A	❍ Yes	❍ No
5.2	If yes to Question 5.1, what is the registered Suite Number?	❍ N/A	❍ Sticker Number	

6	How many rooms will be available for rent?		
7	What will the maximum number of rental occupants?		
8	Will there be multiple bookings at the same time?	❍ Yes	❍ No
9	If there will be multiple bookings at a time, what will be the maximum amount of bookings?		❍ N/A
10	Will you offer any rooms for rent for a duration longer than 30 days per booking?	❍ Yes	❍ No

* Please review this page for more information on how to obtain the properties roll number

SECTION 3: Emergency Contact Information

Full Name:	Company Name (if applicable):
Email:	Phone Number:

Applicant's Declaration:

In relation to the submission of this application, I confirm that I am

i. An owner of the parcel, an authorized agent of the owner of the parcel, or other person having legal or equitable interest in the parcel, and

ii. If the parcel has a condominium board, I have consent from the condominium board to submit this application.

In addition, I certify that all information submitted with this application, including information shown on plans and documents, to be true and correct. Incomplete or inactive applications may be cancelled or refused at the discretion of the proper authority in accordance with their respective bylaw.

❑ I agree to receive correspondence via electronic message related to this application.

The personal information on this form is being collected under the authority of The Calgary Building Permit Bylaw 64M94 (Section 5) and amendments thereto, as well as section 4 (c) of the Protection of Privacy Act (POPA). This information is being collected for the purpose of permit review and inspection processes and may be communicated to relevant City Business Units, utility providers, and Alberta Health Services. It may also be used to conduct ongoing evaluations of services received from Planning & Development. The name of the applicant and the nature of the permit will be available to the public, as authorized by the Access to Information Act (ATIA), unless exempted under the Act's disclosure provisions. You may direct questions about the collection, use or disclosure of your personal information by the City of Calgary at 800 Macleod Trail SE, Calgary, Alberta, in relation to this program by contacting the Access Privacy Protection Administrator for Planning and Development by telephone at (403) 268-5311 or by using the live chat services provided on our websites.