

CITY OF SEWARD
SHORT TERM RENTAL PERMIT APPLICATION

**This application is required for all Short Term Rental (STR)/ Lodging permits **

**In addition, beginning January 1, 2019,
this application is required for all
Short Term Rental/ Lodging Permits renewals
regardless of years in business**

Thank you for doing business in Seward. Enclosed are the materials, contacts and information you'll need to obtain a Short Term Rental/Lodging permit from the City of Seward.

Obtaining a City business license and short term lodging permit go hand-in-hand; when an applicant applies for a business license for running a short term rental lodging business. Once the application is completed and received by the City Clerk's office they check for compliance with various City, Borough and State departments to determine if the applicant is in good standing. ****You must have both a Business license and a Short Term Rental permit to operate.****

The City Clerk's office will forward the application and site plans to the Community Development department to determine whether the proposed location is properly zoned for a lodging business and if the building satisfies the correct code requirements. Please contact them with any zoning questions 907-224-4048 or 224-4049

****Application MUST be turned in prior to scheduling a life safety inspection****

The final step in the process is for the Seward Fire Department (SFD) to conduct an on-site life safety inspection. The Life Safety Inspection and fee of \$47.00 per hour+ tax is required. SFD has set aside the month of February to conduct the majority of the inspections. If you cannot schedule your inspection during this time, be aware that there shall be at least two week delay after you have notified the Fire Department that you are ready for the inspection. Please contact the Fire Department at 224-3445 to schedule your inspection.

The inspection **MUST** be completed prior to the issuance of a lodging permit.

You may not advertise or rent the property as a short term, until you have received your Short Term Rental license from the City of Seward. Any advertisements for the Short Term Rental shall include the City of Seward business license and lodging permit number.

Owner must complete, sign and provide the following: *(Complete instructions, check list and applications are included in Short term rental/Lodging packet)*

- **Completed City Business License application and fee \$30.00** (SCC 8.30.025 (c))
- **Registration for Kenai Peninsula Borough sales tax** (SCC 8.30.025 (c)3)
- **Current State of Alaska business license** (SCC 8.30.025 (c)2)
- **Completed Short Term Rental/ Lodging application** (SCC 15.10. 40(b), 15.10.225 (b))
- **Completed Registration for City of Seward Bed Tax** (SCC 5.45.025, 5.45.035, 5.45.040,5.45.045)
- **Site & Parking Plan** (SCC 15.10.215(b))
- **Floor Plan** (SCC 15.10.215(b))
- **Life Safety Inspection and fee \$47.00 per hour+ tax** (SCC 12.05.011 (d) 9 table 1A # 2) (b)

*****Fees are non- refundable.***

Please be aware that a business license **WILL NOT** be issued unless a short term rental permit has been obtained.

City of Seward business licenses and lodging permits are valid for one year January 1st thru December 31st.

Each of these items must be renewed on an annual basis in order to operate in the City of Seward.

For more information about the applicable Seward City Code, please visit www.municode.com or visit the City Clerk's office at 410 Adams Street in downtown Seward.

If you have any questions regarding this process, please do not hesitate to contact us at the numbers below:

- City Clerk's Office/ application questions: 907-224-4046
- Community Development/ Zoning questions: 907-224-4048 or 907-224-4049
- Finance/ Bed Tax questions: 907-224-4066
- Fire Department/ life safety questions: 907-224-4036

Once again, thank you for doing business in Seward and we wish you a successful business year!

City of Seward
SHORT TERM RENTAL APPLICATION CHECK LIST

Requirements for a City business license:

- Completed city business license application and fee \$30.00** (SCC 8.30.025 (c))
(application and instructions included in packet)
- Registration for Kenai Peninsula Borough sales tax**(application and instructions included in packet)
- Current State of Alaska business license**(application and instructions included in packet)

Requirements for a City Short Term Rental permit:

- Completed Short Term Rental application** (application included in packet)
- Completed Registration** for Seward Bed tax (application and instructions included in packet)
- Proof of Insurance** - Copy of commercial liability insurance with address listed.(not required by code)
- Site Plan**- should include (*see attached example*)
 - Property address, KPB Parcel Number and City Zoning
 - A dimensioned site plan of property showing location of all buildings and parking spaces.
 - Parking Plan should show indication of total parking spaces provided and required by city code.
- Floor Plan** -should include (*see attached example*)
 - A dimensioned Floor plan of home or building complex identifying the bedrooms, bathrooms, doors and common areas to be utilized for lodging.
- Life Safety Inspection and fee \$47.00 per hour + tax** (SCC 12.05.011 (d) 9 table 1A # 2): the Seward Fire Department has set aside the month of February to conduct the majority of the inspections. Call for appointment 224-3445
An approved life safety inspection from the Seward Fire Department requires the following:
 - Address numbers***
 - Numbers must be visible and legible from the street. Minimum 4” high contrasting to background.
 - Carbon Monoxide Detectors***
 - Occupancies that have carbon based fuel appliance(s), an attached garage or carport or are adjacent to a parking space, Carbon Monoxide (CO) Alarm(s) are required. Co Alarms Outside of each separate dwelling unit sleeping area in the immediate vicinity of the sleeping rooms, and on every occupied level of a dwelling unit, including basement, and excluding attic and crawl spaces.
 - Smoke Detectors***
 - Smoke Detectors in each sleeping room, outside each separate sleeping area, in the immediate vicinity of the sleeping rooms, on each level of the dwelling unit, including basements.
 - Code approved egress windows or outside fire exit (s) present for each sleeping area.***
 - Bedroom egress window: Outside window or door operable from the inside without the use of tools, keys, or special effort and shall provide a clear opening of not less than 5.7 foot square. Width shall be not less than 20” inches and height not less than 24” inches bottom of opening shall be not more than 44” inches above the floor. The window shall be within 20’ feet of grade. The window shall be directly accessible to the fire department.
 - Exit doors and means of egress not blocked, doors open without special knowledge or tools.
 - Emergency Exit Plan posted***
 - Emergency Exit plan posted in each sleeping area with a floor plan identifying the primary and secondary exits, occupancy assembly point, and location of portable fire extinguishers.
 - Fire extinguisher(s)(information included in packet)***
 - Fire Extinguisher in a readily available and conspicuous location on each level. Minimum 2A:10BC rating. Fire Extinguisher serviced by certified company annually.
 - Post NO SMOKING sign in conspicuous location.***
 - Extension cords and multi-plug adaptors not approved for permanent wiring.***
 - Exit Signs should be posted when exit is not readily identified***
 - No meal preparation or cooking facilities are permitted in guest bedrooms.***

Once again, thank you for doing business in Seward and we wish you a successful business year!



SHORT TERM RENTAL PERMIT APPLICATION

CALENDAR YEAR: 2019

One application per physical address

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Business Name: _____

State license number: _____ **KPB Sales tax number:** _____

Applicant Name: (Check box for contact preference: email, phone, etc.)

First: _____ Middle: _____ Last: _____

Email: _____ @ _____ . _____ Phone Number: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Physical/Street Address of Short Term Rental: _____ **KPB Parcel #** _____

Property Owner: *Fill out if different than applicant listed above* (Check box for contact preference: email, phone, etc.)

Name: First: _____ Middle: _____ Last: _____

Email: _____ @ _____ . _____ Phone Number: _____

Address: _____ City: _____ State: _____ Zip: _____

Type of Lodging (check one)

Whole House Rental on a Nightly Basis

Room Rental on a Nightly Basis

Zoning District (circle one)

RR R1 R2 R3 OR UR AC CB RM

Is this your primary place of residence? Yes No

- Total number of parking spaces provided: _____ Number required by code: _____
- Total number of bedrooms/apartments in unit/house: _____ Number of rooms used for nightly lodging: _____
- Total square footage of house/unit: _____ SF Total square footage used for nightly lodging: _____ SF

Overnight lodging uses are allowed within single and multi-family residential buildings in accordance with City of Seward Code §15.10.225. A Short-Term Rental (STR)/ Lodging is defined as the rental of any structure or portion of any structure for occupancy for dwelling, lodging or sleeping purposes of 30 consecutive days or less.

Upon approval, all Short Term Rental permits are subject to the following conditions. Signature on this application indicates agreement to these conditions (See packet for complete check list, instructions and applications).

- Completed City Business License application and fee **\$30.00** (SCC 8.30.025 (e))
- Completed Short Term Rental application (SCC 15.10.225, 15.10.226)
- Life Safety Inspection and fee **\$47.00 per hour + tax** (SCC 12.05.011 (d) 9 table 1A # 2)
- Completed Registration for Seward Bed Tax (SCC 5.45.025, 5.45.035, 5.45.040, 5.45.045 hotel/motel)
- Dimensioned Site/ Parking Plan- (SCC 15.10.225, 15.10.226 & 15.10.215(b))
- Dimensioned Floor Plan (SCC 15.10.225, 15.10.226)
- Eligible Zoning Types The use of a short-term rental shall be consistent with the allowable uses within the residential zone and consistent with the provisions of Seward Code §15.10.225, Land Uses.

As Applicant, I _____, certify or declare under penalty of perjury under the laws of the State of Alaska that the foregoing is true and correct

By signing this Application, you are agreeing to the indemnification/hold harmless agreement below:

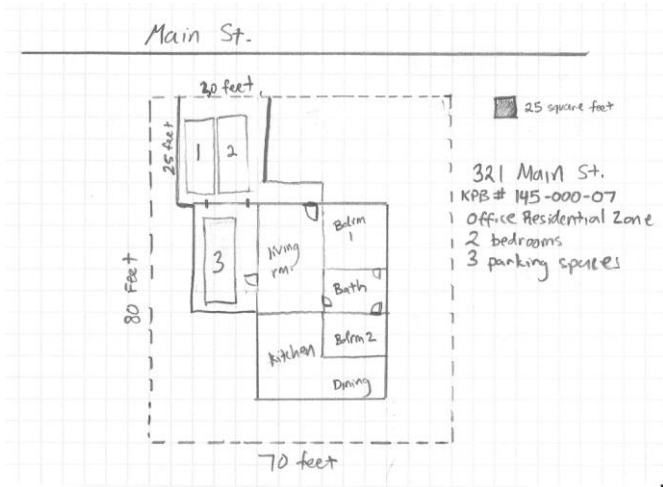
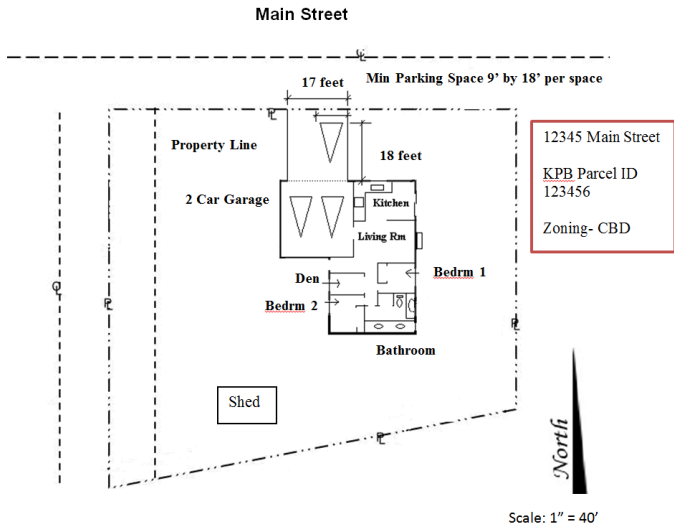
Owner/Applicant, agrees to indemnify, save, protect, hold harmless, and defend the City of Seward, the City Council of the City of Seward, individually and collectively, and the City of Seward representatives, officers, officials, employees, agents, and volunteers from any and all claims, demands, damages, fines, obligations, suits, judgments, penalties, causes of action, losses, liabilities, or costs at any time received, incurred, or accrued as a result of, or arising out of Owner's actions, or inaction in the operation, occupancy, use, and/or maintenance of the Property.

APPLICANT SIGNATURE: _____ **DATE:** _____

Date: _____	OFFICE USE ONLY	Zoning District (circle one) RR R1 R2 R3 OR UR AC CB RM
Zoning review and comments: _____		
Office use only each department must initial & Date for approval		
Clerk _____	Community Development _____	Finance _____
		Fire _____ fee paid for life safety \$ _____
		Clerk _____ Permit Issued ____/____/____



SAMPLE SITE PLAN & FLOOR PLAN EXAMPLES



The following information must appear on the site/floor plan: (see above examples)

1. Site Address
 2. Assessor Parcel Number
 3. Zoning
 4. All rooms in dwelling on all floors (**indicate common areas if room on nightly rental*)
 5. Dimensioned Site & Parking Plan showing number of spaces (see examples above)
- All on-site parking must be located on the subject private property. Include measurements of parking area. Diagram must show parking spaces located within property line
- Must have 9 feet, x 18 feet per exterior space
 - All designated spaces shall be available for the occupants

You can use KPB Parcel viewer to obtain information about your property at <http://mapserver.borough.kenai.ak.us/kpbmapviewer/>

Graph paper has been provided on the back of this page for your site/parking plan

INSTRUCTIONS FOR COMPLETING BED TAX RETURN

PLEASE ROUND ALL FIGURES TO THE NEAREST DOLLAR
ROUND \$.50 UP TO \$1.00 AND \$.49 DOWN TO \$.00

Business Name: The name of the business responsible for collecting the tax.

Filing Period Ended: Operators are required to file quarterly returns, unless their account is delinquent, in which case they are required to file monthly returns. For quarterly filers, filing periods end March 31, June 30, September 30, and December 31. For monthly filers, the “filing period ended” refers to the last day of the month.

Due Date: Quarterly returns are due on or before the last day of the month immediately following the end of the quarter (i.e. April 30, July 31, October 31 and January 31). Operators who have been delinquent in filing within the past six months must file monthly returns each month on or before the last day of the following month.

Business Physical Location: List the street/physical address of your property. Do not list post office boxes.

Mailing Address: The operators address where you receive your mail and correspondence about your business account.

Registration Number: The number is issued by the City of Seward to operators who have obtained a Certificate of Registration for collection of the tax.

Telephone and Email: Business owner’s contact number and email address.

- 1) **Gross Rents:** All rents collected during the collection period as monetary consideration for the use of a room or rooms in a hotel/motel by a guest. There is no cap for daily or weekly rental amounts for hotel/motel room tax, therefore total gross daily and weekly sales are subject to hotel/motel room tax. This figure should not include sales tax or hotel/motel room tax. All rents should be rounded to the nearest dollar.
 - a) Gross rents collected during the first month of the quarter for which a return is being submitted (i.e. January is the first month of the quarter ending March 31). If a monthly return is being submitted, this field would include gross rents for the month of return.
 - b) Gross rents collected during the second month of the quarter for which a return is being submitted (i.e. February is the second of the quarter ending March 31).
 - c) Gross rents collected during the third month of the quarter for which a return is being submitted (i.e. March is the third month of the quarter ending March 31).
 - d) Total Gross Rents for the quarter. **Add Lines 1A, 1B, and 1C.**
- 2) **Less Non-Taxable Rents:** These are rents which are included in the gross rents figure above and are exempt from the tax for one of the following reasons:
 - a) Rent paid directly by government agency. Government employees are not exempt from paying the tax unless the United States government, the State of Alaska, or any of the State’s political subdivisions directly remits payment for the rent. Complete schedule A and remit the form with your hotel/motel room tax return.
 - b) Monthly rentals complete Schedule B and remit the form with your hotel/motel room tax return.
 - c) **Total of Schedules A and B**
- 3) **Taxable Rents:** Gross Rents (Line 1D) minus Total Non-Taxable rents (Line 2C).
- 4) **Room Tax Rate:** The hotel/motel room tax for all filers is 4%.
- 5) **This Filing Periods Tax:** Taxable Rents (Line 3) multiplied by .04. Tax amount should be rounded to the nearest dollar.
- 6) **10% Penalty:** If the return is late, a penalty of 10% of the delinquent hotel/motel tax is assessed. Multiply This Filing Periods Tax (Line 5) by .10. Do not round to the nearest dollar when calculating penalty amount.
- 7) **Interest/Other:** If the return is more than one month late, interest on the amount due on Line 5 is due at the rate of 10% per year, compounded monthly at .833%. Other adjustments to the tax should be reported here along with a detailed explanation. Do not round to the nearest dollar when calculating the interest amount.
- 8) **Previous Balance Due:** Enter any prior balance due here.
- 9) **Total Tax Due: Add lines 5, 6, 7 and 8.**

Payment instructions: Please submit the bed tax return with payment due to City of Seward-Finance Department. If submitting by mail, do not send cash and include a check made payable to City of Seward. Use the address provided top of the Page 1 when mailing in your completed RETURN.

An incomplete or improperly prepared form is the same as not filing a return which may result in late penalties and interest. If you have questions, please call the City of Seward Finance Department at 224-4050.



BED TAX RETURN FORM

Business Name _____ Filing Period Ended _____ Due Date _____

Business Physical Location _____ Registration Number _____

Mailing Address _____ Telephone _____ Email _____

- Request to pre-file: Zero tax collected through (month/year) _____ (for maximum of 9 months)
- If this is your final return, check here and indicate the reason below:
- Business Sold – To whom/Date sold _____ Business Closed – Date _____

All Returns Must Be Filed – Including Returns with No Sales
(Round to nearest dollar)

		Internal Use Only
1. Gross Rents (not including sales tax or room tax)		
A) First month of quarter	\$	
B) Second month of quarter	\$	
C) Third month of quarter	\$	
D) Gross Rents Total (Line 1A + Line 1B + Line 1C)	\$	
2. Less Non-Taxable Rents (attach Schedules A & B)		
A) Schedule A - Tax Exempt List total	\$	
B) Schedule B - Monthly Rental List total	\$	
C) Total Non-Taxable Rents (Line 2A + Line 2B)	\$	
3. Taxable Rents (Line 1D minus Line 2C)	\$	
4. Room Tax Rate, 4%	X .04	
5. This Filing Periods Tax (Line 3 multiplied by Line 4)	\$	BED
6. Plus 10% PENALTY if this return and related tax are not postmarked by the Due Date above (Line 5 multiplied by .10)	\$	PEN
7. Plus Interest/Other Delinquent tax bears interest at 10% per year or .833%/month	\$	PEN
8. Previous Balance Due	\$	
9. Total Tax Due (Line 5 + Line 6 + Line 7 + Line 8)	\$	

Owner/Agent Signature/Date _____

Make check payable to: City of Seward Payments must be made in U.S. Funds and drawn on a U.S. Bank.

I declare, subject to the penalties prescribed, that this return (including any accompanying statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete return. I understand that any false statements could result in penalties as provided by law. Submit this form to City of Seward – Finance Department

Revised 12/01/2018

**CITY OF SEWARD
PO BOX 167
SEWARD, AK 99664**

BED TAX SCHEDULE A - TAX EXEMPT LIST (SCC 5.45.015)

The purpose of this form is to provide a list of all daily and weekly sales that are tax exempt for bed tax puposes. Enter the date of lodging in column A, the name of the non-taxable entity in column B, the name of the guest in column C, form of payment in column D, E, or F and tax-exempt amount in column G. Add all up non-taxable sales and list the grand total on the bottom of Schedule A and line 2A on the Hotel/Motel Room tax Return. Rent must be paid directly by the non-taxable entity in order for the rent to be exempt from the four (4%) percent room tax. This does not include a right of reimbursement from the United States Government, the State of Alaska, or any of the State's political subdivision to the guest. If another governmental entity makes a direct payment to the vendor via check or purchase order, the entity is exempt for bed tax purposes. However, if the governmental EMPLOYEE makes the purchase using a government-issued credit card, the card number itself determines whether the room is taxable for that particular employee.

A	B	C	D	E	F	G
Date of Lodging	Name of Non-Taxable Entity	Name of Guest	(D) First 6 Digits of the Government Credit Card Number or (E) Government Issued Check Number or (F) Government Issued PO Number			Tax-Exempt Amount
Total (2A)						\$
(Round to the nearest dollar, enter total on line 2A of the Hotel/Motel Room Tax Return)						