Short-Term Accommodation Licensing Service

Responsible Person Consent Form

This form must be completed by the Responsible Person and is required even if the Applicant/Licensee of the Short-Term Accommodation is also the Responsible Person pursuant to the Town of Collingwood's Short-Term Accommodation Licensing By-law 2024-078. This completed form must accompany the Short-Term Accommodation Licence Application.

As required by Schedule "B" of the Short-Term Accommodation Licensing By-law 2024-078, the Licensee must provide "*the name and contact information of the Responsible Person who can be contacted within thirty (30) minutes and respond to an emergency or contravention of this By-law or any Applicable Laws, including attendance on site of the Premises within sixty (60) minutes of being notified of the occurrence*".

Responsible Person's Name: _____

Phone: _____ **Email:** _____

Responsible Person Acknowledgement

I, _____ *(Responsible Person's Name)*, acknowledge that I am the "Responsible Person" for the Short-Term Accommodation located at _____ (*Property Address) Collingwood, Ontario*. I understand and consent to the following:

1. My name, telephone number, and email address will be published on the Town of Collingwood website and made available to the public.
2. If contacted by a member of the public, the Town of Collingwood, the Ontario Provincial Police, or an external agency, I will:
    - Be available to respond within 30 minutes by telephone or email.
    - Be available to attend the premises within 60 minutes of being contacted to ensure compliance with the Licence.

Responsible Person Signature: _____

Date: _____