



SHORT-TERM ACCOMMODATION (STA) RESPONSIBLE PERSON DECLARATION FORM

Complete this form if you are agreeing to act as a Responsible Person under the Town of Wasaga Beach Short-Term Accommodation By-law 2026-08 (must be completed if even if you are the property owner). I, the undersigned, hereby declare that I am agreeing to be bound as the Responsible Person for the following property:

Municipal Address: _____

Property Owner(s): _____

I hereby affirm that I have read and understand the requirements as well as my responsibilities under the Bylaw. I understand that I must respond to Officers within thirty (30) minutes when contact by email or phone. I understand that I must be available to respond to an emergency or contravention of any Town Bylaw at the STA premises within a period of no greater than one (1) hour from when communication is sent from an Officer by being physically present at the STA premises. I understand that the information provided in this Responsible Person Declaration Form will be collected and used for administrative and verification purposes. I acknowledge and consent to the information contained in this form being published on the Town's website and made publicly accessible as part of the required public record. I confirm that the information I have provided is accurate and complete to the best of my knowledge and that I understand it may be viewed by members of the public once posted online.

I accept the terms as set out in the Bylaw and hereby agree to be bound as the Responsible Person for the above-mentioned property and property owner(s). I affirm that I am 18 years of age or older. If, for any reason, I wish to release myself from this responsibility, I shall advise the property owner(s), if applicable, as well as the Town, in writing, at least thirty (30) days prior to the termination of my duties as the Responsible Person for the above property.

Signature of Responsible Person

Name (please print)

Date

I, the undersigned, agree to the above named being designated as the Responsible Person for the above-mentioned property for which I am the registered owner.

Signature of Owner

Name (please print)

Date

Notice of Collection: Personal Information is collected under the legal authority of the Municipal Act, 2001, S.O. 2001 c.25, and the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) and will be used in the administration and enforcement of the Short-Term Accommodation Licensing By-law. Personal information will only be kept for as long as necessary to fulfill the purpose for which it is collected. Questions regarding this collection, use and disclosure of personal information may be directed to the Clerk's Department, 30 Lewis Street, Wasaga Beach, ON L9Z 1A1 (705)429-3844 foi@wasagabeach.com.