Short-Term Rental Unit Permit Program (STRU Permit Program)

Change of Information

- Complete a short-term rental permit change of information application which can be found on our web page https://www.seviercountytn.gov/news_detail_T2_R68.php

- Email the completed change of information to our office at amiller@seviercountytn.org or apreat@seviercountytn.org

Please Note:

- Any applications submitted on behalf of the owner are required to have an owner's acknowledgement form completed, signed by the owner, and submitted at time of application.
- Any applications that do not have a completed and signed owner's acknowledgement for MUST be signed by the owner.
- Applications received that are not signed by the owner and do not have an owner's acknowledgement form will not be considered valid and will not receive a permit.
- Owner's acknowledgement can be found on our webpage https://www.seviercountytn.gov/news_detail_T2_R68.php

For any additional questions our office can be reached at:

Email: apreat@seviercountytn.org or amiller@seviercountytn.org

Phone: 865-774-3603

Mailing Address: 149 Industrial Park Station # 1
Sevierville, TN 37862

We do receive a high volume of calls each day. Please reach out via email for a faster response time.

Sevier County Short-Term Rental Permit Application

Telephone: (865) 774-3603

Email: firecodequestions@seviercountytn.gov

Sevier County Fire Marshal's Office
149 Industrial Park Dr
Sevierville, TN 37862

Change Of Owner ☐ Change Of Management ☐ Change In Occupancy ☐

A Short-Term Rental annual operational permit fee of $250 for an occupancy of 12 or less, 13 occupants or more is an additional $25 per occupant.

Note: If upon completion of inspection it is determined there are sleeping accommodations or the property is being advertised for more than what is selected on this application, then the owner shall be billed for the difference in price.

Note: All permit fees are non-refundable.

Property Address: _____ Unit#: _____ Property Name: _____ Property I.D.

Number (Office use only): _____ Number of Sleeping Rooms: _____ What year was the structure built _____

Maximum Occupancy: _____ (Number of people allowed to occupy property)

If Property is owned by a LLC please list the LLC here with individual contact information below: _____

Property Owner Name: _____ My Property is Outside of any City Limits __Yes __ No

Mailing Address: _____City, State, Zip Code: _____

Work Phone: _____ Mobile: _____

Owner's Physical Address: _____ City, State, Zip Code: _____

Owner's Email Address: _____

Property Management: ____ None-Self-Managed

Company Name: _____

Mailing Address: _____City, State, Zip Code: _____

Work Phone: _____ After Hours Phone: _____

Management's Physical Address: _____

City, State, Zip Code: _____

Management Email Address: _____

Local Contact for Problems or Emergency: ____ Contact Owner ____ Contact Mgt. Company

Name: _____

Mailing Address: _____City, State, Zip Code: _____

Work Phone: _____ After Hours Phone: _____

Local Contact's Email Address: _____

Short-Term Rental Permit Program Info:

- ***A Short-Term Rental Permit is required for the operation of short-term-overnight rental units within the unincorporated areas of Sevier County as of January 1st , 2024***
- ***Short-Term Rental Permit shall be Valid for 12 Months pending on-site inspection***
- ***Short-Term Rental Units which are operating without a permit may be assessed a penalty of $50/day of operation.***
- ***Short-Term Rental Units which have not obtained a Short-Term Rental Unit Permit prior to June 30th, 2024, or who have failed to maintain a Short-Term Rental Unit permit for more 6 months shall be required to meet the Locally Adopted Fire and Life Safety Codes.***
- ***Sold or no longer opperating as a STRU units must have a completed and notarized form on file to update the account.***

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LIFE SAFETY COMPLIANCE

VERIFICATION FORM

The Owner must certify compliance by signing below. All fields are required.

Verification of number and locations are required for the entire property, even those areas or rooms that are not available for Occupancy as part of the Short-Term Rental Unit. Every smoke and carbon monoxide alarm must function properly with the alarm sounding after pushing the test button. Smoke alarms must meet Underwriters Laboratory (UL) 217 standards and must be installed inside sleeping rooms, outside sleeping rooms in the immediate vicinity of bedrooms, and on each story, including basements. Carbon monoxide alarms must be within 15 feet of the door of all bedrooms. There must be at least one (1) fire extinguisher on each level in the Short-Term Rental Unit.

Number and location(s) of smoke alarms:

_____

_____

Number and location(s) of carbon monoxide alarms:

_____

_____

Number and location(s) of fire extinguishers:

_____

_____

BY SIGNING BELOW, I AFFIRM THAT THE CONTENTS OF THIS FORM ARE TRUE AND THAT THE EQUIPMENT NOTED ABOVE IS FULLY OPERATIONAL. I ACKNOWLEDGE THAT THE COUNTY RESERVES THE RIGHT TO VERIFY THE PLACEMENT AND OPERATION OF THE EQUIPMENT BY INSPECTION.

Note: The property owner on record at the time an invoice is created is responsible for full payment of that invoice. Failure to notify our office of the removal of a unit from the short-term rental program does not relieve the owner of financial responsibility. If a unit remains unpaid sixty **(60)** days after the invoice date, the permit will be revoked. Units with a revoked permit are not authorized to operate as a short-term rental and may not resume operation until all outstanding balances are paid and the permit is reinstated in good standing.

Owner:

_____

Owner Signature

_____

Print Name

_____

Date

If Change of Owner:

Date Unit was Purchased: _____

Please note applications must be signed by the OWNER. Applications may be submitted on behalf of the owner ONLY if an owner's acknowledgement form has been completed, signed by the owner, and is submitted at time of application. Any application received with no owner's acknowledgement and not signed by the owner will not be vaild and will not receive a permit. (Owner's acknowledgement forms may be found on our webpage.) www.seviercountytn.gov

SEVIER COUNTY FIRE MARSHAL'S OFFICE

SHORT-TERM RENTAL UNIT INSPECTION PROGRAM

The below list is consistent with the original guidelines for commonly found issues released in January 2024, but has been updated to provide additional detailed information per guideline to help owners prepare for inspections based on questions we have been receiving.

Please understand this list is designed to give guidance to the most commonly found issues and IS NOT a list of ALL inspection items.

****This list is subject to change****

Requirements may vary based on multiple factors regarding each property. (i.e. when it was built, if it was remodeled, etc…)

ADDRESS IDENTIFICATION: IFC Section 505. Address identification is important so First Responders can locate your unit in the event of an emergency.

- Address numbers shall be plainly visible from the street or driveway entrances. These shall be a minimum of 4" tall numbers and can be on the house or mailbox.
  - Identification will be needed for each rental unit if more than one unit shares the same address. Example: Unit #1 and Unit #2
- The required 4" identification numbers can be found at hardware stores, Amazon, Wal-Mart, and similar stores.
- Splits in driveway must have address numbers indicating the direction of property.

ALARMS AND DETECTORS:

CARBON MONOXIDE DETECTORS:

- Working carbon monoxide detectors are required **within 10 feet** of every fuel burning, natural gas, or propane appliance.
- Carbon monoxide detectors must be **within 15 feet** of the door of all bedrooms.
- Every carbon monoxide alarm must function properly with the alarm sounding after pushing the test button.

SMOKE ALARMS:

- Smoke alarms must meet Underwriters Laboratory **(UL) 217** standards and must be installed inside sleeping rooms, outside sleeping rooms in the immediate vicinity of bedrooms, and on each story, including basements.
- Working smoke alarms are required in each bedroom or sleeping area, corridors and living areas.
    - *Sleeping area means any space that has a bed, sofa bed, bunkbed, futon or any surface for sleeping*.
- Interconnected Smoke Alarms: STRUs must have interconnected smoke alarms. The Wireless interconnected alarms are acceptable and MUST be UL listed.
- ***Interconnected means if one smoke alarm goes off, they ALL go off.*** This can be achieved by hard wired to house electrical system by a licensed electrician, or UL listed wireless device. The wireless devices have to be individually programmed. Check manufacturer's guidelines.
- Smoke alarms must function properly with the alarm sounding after pushing the test button.

CHIMNEY and FIREBOXES:

- Chimneys and fireboxes must be professionally cleaned and inspected **annually**.
    - This must be performed by a certified chimney sweep.
- It is **recommended** to have gas burning heating appliances inspected annually.
- If a chimney is no longer in service, functionable, or if an owner does not allow the use of the chimney, then it must be completely blocked off from visitor access.

EVACUATION MAPS AND EXITS:

- Maintenance of exit ways is required in accordance to code.
- Exits shall not be obstructed at any time.
- **Floor Evacuation Plans**: Short-Term Rental Units are required to have floor evacuation plans on each level that depict the locations of sleeping areas and exit routes.
    - They need to be placed in a conspicuous area on each level.
    - Evacuation plans need to have "YOU ARE HERE" marked and guidance on how to exit the unit from that spot.

- Floor Evacuation Plans can be hand drawn, computer generated, or professional designed based on owners' preference of design.
- Working exit and emergency lighting when applicable.

FIRE EXTINGUSHERS:

- A fire extinguisher having **a minimum rating of 2A:10BC** shall be required on **every level** of the unit. There must be at least (1) one fire extinguisher on each level of the unit.
- Fire extinguishers are required to be inspected and tagged on a yearly basis by a certified extinguisher company.
- If a new extinguisher was purchased this year a copy of the receipt must be readily available upon inspection. And will be required to be certified and tagged by a certified fire extinguisher company for the next year and thereafter.
- Proper identification must be present if a fire extinguisher is kept behind a closet door or cabinet door. A sticker/label must be present on the door/cabinet identifying the fire extinguisher is inside: "Fire Extinguisher Inside".

GRILLS AND FIRE PITS:

CHARCOAL GRILLS:

- Charcoal grills or other open flame cooking devices are NOT permitted on any surface of the structure. Must be 10 feet from structure and any combustible surface. Unless approved by Fire Code Official.

NATURAL GAS AND PROPANE GRILLS ON DECKS MUST HAVE:

- Natural Gas and Propane Grills must have:
  - A non-combustible mat
  - 60-minute shut off timer installed on the gas line
  - Secured to the deck so the grill cannot be moved ▪ Be 18 inches from any railings or sides of the structure. *60-minute timer, non-combustible mat can be purchased at home improvement stores, hardware stores, online, and similar stores.

<u>WOODBURNING OR OTHER NATURAL BURNING FIRE PITS:</u> No open burning devices such as fire pits are permitted on any combustible surfaces of the structure at any time.

- Natural Buring(wood) must be a minimum of 15ft from combustible surfaces and structure (decks are included into part of the structure).

<u>POOLS AND POOL ROOM ACCESS:</u> This is a general guide line. For more guidance, please refer to 2018 INTERNATIONAL SWIMMING POOL AND SPA CODE (ISPSC).

- **Indoor pools:**
    - Doors accessing a pool room must be equipped with either:
- Self-closing/self-latching door outswing with latch release at 54” from floor
- Single button bypass on each side of door alarm compliant with UL 2017
- Automatic pool cover that conforms to ASTM F1346 Standard Performance Specification for Safety Covers and Labeling Requirements for All Covers for Swimming Pools, Spas and Hot Tubs.
    - Pools must be equipped with an in-water splash alarm as per T.C.A. §§ 68-14-801—807(Katie Beth’s Law)
    - Any opening, such as a garage door that cannot be protected by either self-closing/self-latching door, or Single button bypass door alarm, must have a barrier/fence installed to prevent access to pool when door is open.

- **Outdoor Pools:**
    - A fence completely surrounding the pool is better than one with the house serving as the fourth side. Fences shall be a minimum of 48 inches high, although fences 5 feet or higher are preferable. If the home or other structure serves as one or more sides of the barrier, install door and window alarms on all openings leading to the pool area. Pool covers add another layer of protection and there are a wide variety of styles on the market. The barrier shall maintain 48 inches in height for a distance of 36 inches horizontally.
    - Doors coming from the structure leading directly to the pool area, must be outswing. Self-closing/ self-latching with latch release at 54" from floor or have a single button bypass on each side of door alarm compliant with UL 2017
    - Gates must be self-closing/self-latching opening outwards. The latch for gate must be mounted no less than 54 inches from ground.
    - Pools must be equipped with an in-water splash alarm as per T.C.A. §§ 68-14-801—807(Katie Beths' Law)

HOT TUBS:

- Windows that are 60 inches or less from a hot tub must be tempered or have an ANSI 97.1 safety film installed on the side of the threat.
- Fall protection is needed when a hot tub is closer than 18 inches to deck railing. It is measured 36 inches from the seated position.
- The cover (ASTM F 1346) must be intact, and in good working condition.

FIRE PROTECTION SYSTEMS:

- Must be inspected annually by a licensed company in the State of Tennessee to complete fire sprinkler system inspections.
    - All deficiencies noted by company completing inspection must be corrected.

FIRE ALARM SYSTEMS:

- Must be inspected annually by a licensed company in the State of Tennessee to complete fire alarm system inspections.
    - All deficiencies noted by company completing inspections must be corrected.