Short-Term Rental Accommodation and Bed & Breakfast Licence

Declaration of Short-Term Rental Accommodation and/or Bed & Breakfast Closure

Declaration of Owner(s)

I/We, _____ CERTIFY THAT:
[Print Name(s)]

As of the date listed below, I am no longer operating a Short-Term Rental Accommodation and/or a Bed & Breakfast in the Township of Oro-Medonte at the property located at

_____, Oro-Medonte, Ontario,
(Property Address)

I acknowledge that if I wish to continue to commence operating my Short-Term Rental Accommodation and/or Bed & Breakfast in the future, I must comply with the licensing requirements of the Short-Term Rental Accommodation and Bed & Breakfast Establishment By-law 2026-078, or any subsequent licensing by-laws prior to advertising or operating a Short-Term Rental Accommodation and/or Bed & Breakfast.

_____ _____

Witness (Print Name) Signature

_____

Date

_____ _____

Date Owner(s) Signature (s)

Please return by _____ to:
(Date)

Township of Oro-Medonte, Municipal By-Law Department,
148 Line 7 South, Oro-Medonte, ON L0L 2E0
MunicipalLaw@oro-medonte.ca

Notice of Collection

Personal information collected on this form is in accordance with the *Municipal Freedom of Information and Protection of Privacy Act* and will be used for the administration and enforcement of the Short-Term Rental Accommodations and Bed & Breakfast Licensing By-law. For inquiries, contact the Records and Information Coordinator, Township of Oro-Medonte.