



SITE PLAN REVIEW
Site Plan Review

SHORT-TERM RENTAL APPLICATION

MONROE, NEW HAMPSHIRE

Name of Site Plan: <small>(Planning Board Use)</small>		File Number: STR- <small>(Planning Board Use) STR-Year-Map#-Lot#</small>	
Owner Last Name-Year			
Map#:	Lot#:	Street Address:	
Name of Owner(s):			Phone Number:
Mailing Address:			
Email Address:			
Site Plan Information			
Is the Short Term Rental (STR):			
<input type="checkbox"/> - An existing residential dwelling?			
<input type="checkbox"/> - An additional unit (Registered Camper, RV, or tiny home on wheels)?			
What is the maximum number of:	Guests allowed?	Guest Rooms:	Guest Beds:
Is the address posted and clearly visible from the road?			<input type="checkbox"/> - Yes <input type="checkbox"/> - No
Is the address posted and clearly visible inside the rental for guests?			<input type="checkbox"/> - Yes <input type="checkbox"/> - No
Are there fire extinguishers, smoke detectors and carbon monoxide detectors in the rental?			<input type="checkbox"/> - Yes <input type="checkbox"/> - No
Fire Extinguishers: Number, Condition & Locations (Required in the Kitchen Area):			
Smoke Detectors: Number, Condition & Locations:			
CO Detectors: Number, Condition & Locations:			
Are any accommodations located in the basement or below grade?			<input type="checkbox"/> - Yes <input type="checkbox"/> - No
If Yes, describe egress (Doors, windows, size, type, locations, lighting):			
Is access sufficient for emergency vehicles?			<input type="checkbox"/> - Yes <input type="checkbox"/> - No
If the rental is located somewhere where emergency service access is limited and response may be delayed, how are guests informed?			
Length of driveway?			
Grade of driveway?			
Driveway material/construction:			



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Are there outdoor fire places/campfire locations for use by guests?	<input type="checkbox"/> - Yes <input type="checkbox"/> - No
If yes, are they located in compliance with regulations, is written permission on-site and are there instructions explaining the process for guests to obtain fire permits?	<input type="checkbox"/> - Yes <input type="checkbox"/> - No
Is the noise level expected to exceed that of normal residential use?	<input type="checkbox"/> - Yes <input type="checkbox"/> - No
Will the rental be available for winter use by guests? If yes, describe winter access and the snow removal plan:	<input type="checkbox"/> - Yes <input type="checkbox"/> - No
Is the rental located on an unmaintained road? If yes, describe access:	<input type="checkbox"/> - Yes <input type="checkbox"/> - No
Describe trash storage and disposal plans:	
Is parking capacity adequate for the maximum number of guests permitted?	<input type="checkbox"/> - Yes <input type="checkbox"/> - No
Describe the type and location of outdoor lighting:	
Are there any deed restrictions, easements, covenants etc... on the property? (If yes, attach a detailed description and list of all parties with rights; including names, physical address and mailing address)	<input type="checkbox"/> - Yes <input type="checkbox"/> - No
Do you have a NH state Meals and Rooms Tax ID?	<input type="checkbox"/> - Yes <input type="checkbox"/> - No
If Yes, NH state Meals and Rooms Tax ID #:	
If No above and the rental company provides compliance of the NH Meals & Rooms tax, a copy of the statement of compliance is attached:	<input type="checkbox"/> - Yes <input type="checkbox"/> - No
Additional information on the NH state Meals and Room Tax can be obtained at: Taxpayers Services at (603) 230-5920 New Hampshire Department of Revenue Administration Governor Hugh Gallen State Office Park 109 Pleasant Street (Medical & Surgical Building) Concord, NH 03302-1467	
Describe the anticipated vehicle traffic, including any changes to current volume, times of use etc...:	
If the STR is utilizing accommodations other than the existing residential dwellings, is landscaping and screening such as to shield neighboring properties from undue impact ?	<input type="checkbox"/> - Yes <input type="checkbox"/> - No



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Site Drawing

- **Must submit 3 copies** - Size can be from 8.5 inches x 11 inches to 24 inches x 36 inches
- **Drawing must include:**
 - Location – Tax Map, Lot Number and street address
 - Approximate scale
 - Arrow indicating the general direction of north
 - Setbacks
 - Location and description of items described in application. I.e dwellings, campers, parking, driveway etc...
- **Drawing may be done below or attached as separate**



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Applicant Acknowledgement		
The undersigned applicant hereby submits to the Monroe Planning Board the above Site Plan and respectfully requests approval of said Site Plan. In consideration for approval and privileges occurring thereto, the applicant hereby agrees:		Initial to Agree
1	To comply with all provisions of the Town of Monroe site plan review, subdivision and zoning regulations.	
2	To save the Town of Monroe harmless from any obligation it may incur or repairs it may make because of my failure to carry out any of the foregoing provisions.	
3	To make no changes whatsoever to the Final Site Plan as approved by the Board unless a revised Plan is submitted to and approved by the Board.	
4	To allow and coordinate access for inspection of the rental property by the Monroe Fire Department.	
5	To provide the names, address and phone numbers of all owners of record. (list attached)	
6	To provide the names, address and phone numbers of all easement holders. (list attached)	
7	To provide the names, address and tax map information of all abutters. (list attached)	
8	Mr./Mrs./Ms. _____	
	NAME(S)	
	of _____	
	ADDRESS	
	EMAIL ADDRESS	PHONE NUMBER
Is hereby designated as the person on whom all communications to the applicant may be addressed and the person on whom legal process may be served in connection with any proceedings arising out of the agreement herein.		
Applicant Signature and Certification		
I certify that the information provided is true and correct to the best of my knowledge and I have not made any willful omissions. I understand that any omissions may result in the denial of this application.		
Print Name		Signature
		Date
PLANNING BOARD REVIEW		
Reviewed by:		Date:
FINAL ACTION: <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED (Reason for denial attached) Date:		

- This application must be presented to the Planning Board at least 21 days prior to a scheduled public meeting of the Planning Board
- Prior to the meeting to consider the application for acceptance, due notification (Section 6.04) of the date of the meeting must be made to owner(s), applicant(s), abutter(s), easement holder(s), any professional whose seal appears on the plan, and the general public