

Short-Term Rental Checklist and Affidavit for Renewal

Property Owner (Name/Phone/Email): _____

Designated Agent if applicable (Name/Phone/Email): _____

24/7 Phone Number (In Case of Emergency): _____

Short-Term Rental Property Address: _____

- Any structure 3 units or more could be required to be sprinkled to meet the Arkansas Fire Prevention Code Vol II.
- Must have smoke alarms, either battery operated (w/radio feature preferred) or interconnected hard wired, on every floor level, in every bedroom, and outside of bedrooms per the Arkansas Fire Prevention Code Vol III.
- Carbon monoxide detectors shall be installed and in working order if gas is present in the home or attached garage. The detector must be placed near the source of gas and/or the garage entrance per the Arkansas Fire Prevention Code Vol III.
- Portable space heaters are a minimum 3 feet from combustible materials and not used for primary heat source.
- Extension cords are in good condition, used safely, not under carpets, or across walking areas. (Not allowed for permanent wiring)
- All escape routes are clear of obstructions and easily accessible.
- All sleeping areas have egress windows or a door directly to the outside.
- The furnace has been inspected in the past year and filter replaced. Keep copy of invoice near the equipment for inspection purpose.
- The fireplace chimney has been inspected and cleaned.
- Need portable fire extinguishers visible on each floor and up to date.
- Electrical panels shall be labelled.
- All plugs in kitchen, bathrooms, and within 6' of water source must be GFCI protected.
- Decks and balconies must be in good working order.
- Handrails and guardrails must be installed and in good working order where required by the Arkansas Fire Prevention Code Vol III.
- Address must be displayed in contrasting colors and facing the street.
- All gas, water, and electrical must have shutoffs in place.

For questions about checklist items, please feel free to call Building Safety at 479-575-8238 and request to speak with an inspector.

The applicant affirms, under penalty of perjury, that the information contained herein is true and correct to the best of his/her knowledge and belief and agrees to hold the city harmless for any damages resulting from applicant's misrepresentation, intentional or otherwise.

Owner or Designated Agent:

Signature: _____

Print Name: _____

Date: ____/____/____

STATE OF _____

COUNTY OF _____

SWORN TO AND SUBSCRIBED before me, Notary Public this __day of

_____, 2023.

Notary Public

My Commission Expires: _____