



Town of Bar Harbor
Planning & Code Enforcement

Shared Accommodations License Application

Property Address: _____ Map and Lot: _____

I. Applicant Information

Full Name: _____
Last First Middle Initial

Mailing Address: _____
Please include full address with city, state and zip code

Phone Number: _____ Email: _____

Are you the owner of the property for which the license is being applied? Yes No
If no, written letter of authorization to act on behalf of the property owner must be provided.

II. Owner Information

Full Name: _____
Last First Middle Initial

Mailing Address: _____
Please include full address with city, state and zip code

Phone Number: _____ Email: _____

III. Management Personnel

Please list two management personnel who are available 24 hours a day and are available to be on-site within 30 minutes of contact:

1. Name: _____ Phone Number: _____

2. Name: _____ Phone Number: _____

IV. General Requirements

Maximum # of occupants: _____ Total # of bedrooms: _____ # of clothes washers: _____

Total # of toilets: _____ Total # of showers: _____

V. Disclaimer and Signature

I, the undersigned certify that:

- I have read and understand Chapter 168 “Shared Accommodations Licensing Ordinance”
- I have read and understand Chapter 64 “Disorderly Houses”

By signing this application, I certify that I agree to comply with the rules and regulations contained in Chapter 168 of the Bar Harbor Town Code and all applicable standards of the Bar Harbor Town Code. I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____

Printed Name: _____

VI. Required Submissions

- Attach written letter of authorization allowing you to act on behalf of the owner of the property
- Attach a full set of to-scale floor plans, clearly labeled with the intended use of each room in the building, including any spaces to be used as storage.
- Complete and attach appendix a – the written narrative.

VII. Life Safety Inspection

The Shared Accommodations structure successfully passed the required inspection on this date: _____

_ Signature of the Fire Chief Date

_ Signature of the Code Enforcement Officer Date

----- For Office Use Only -----

Date application received _____ Date license fee paid _____

Date abutters notices mailed _____

Date of Town Council public hearing _____

Action taken by the Town Council APPROVE/DENY Date _____



Shared Accommodations - Appendix A - Written Narrative

Please explain how the Shared Accommodations will comply with the following general requirements as outlined in Chapter 168.

168-6 A. Space requirements. Each bedroom shall contain not less than 70 square feet of habitable floor area for each occupant excluding enclosed spaces such as closets and bathrooms, and shall not be less than 7 feet in any horizontal direction.

168.6 B. Linens. All linens, including bed sheets, pillowcases, blankets, and pillows, shall be provided to each occupant by the property owner or management personnel.

168.6 C. Bathing facilities. There shall be a minimum of one toilet for every 5 occupants, and one shower for every 5 occupants.

168.6 D. Cooking facilities. A minimum of one on-site community kitchen with facilities for cooking, refrigeration, and washing shall be provided for the first 8 occupants. For every 1-12 additional occupants thereafter, another on-site community kitchen with facilities for cooking, refrigeration, and washing shall be provided (two on-site community kitchen facilities for cooking, refrigeration, and washing shall be provided for 9-20 total occupants, three such on-site community kitchens shall be provided for 21-32 total occupants, etc.). If the employees have access to an employee dining room (EDR) or are provided at least one shift meal, a single community kitchen shall be provided for every 45 occupants.

168.6 E. Outdoor storage. The keeping of goods, junk or material of any kind with the exception of functioning bicycles, in the same place for more than 24 hours shall be screened from public view and neighbors by a fence, wall, roof, and/or landscaping.

168.6 F. Clothes washer. On-site access to a minimum of one clothes washer and dryer must be provided.

168.6 G. Pest Control. Structures shall be kept free from insect and rodent infestation. Structures in which insects or rodents, or traces of, are found shall be promptly exterminated by approved processes that will not be injurious to human health.

168.6 H. Management. If management is located off-site for a SA-1, they must be available to be present on-site within 30 minutes of being contacted. Management for SA-2 and SA-3 must be on-site between the hours of 9:00 p.m. and 3:00 a.m.; and between 3:00 a.m. and 9:00 p.m., the management must be available to present on-site within 30 minutes of being contacted..

168.6 I. Trash and recycling removal. Outdoor trash and recycling must be contained in a covered receptacle and must be removed on a weekly basis.

168.6 J. Property maintenance. The lot where the Shared Accommodations is located shall be maintained in compliance with Chapter 109 "Health and Sanitation" of the Bar Harbor Town Code, as enforced by the Bar Harbor Health Officer.

168.6 K. Emergency key box. An emergency key box shall be provided via a Knoxbox located on the site in a location approved by the Fire Chief or his designee.

168.6 L. Tenants. A list of the last names of all tenants occupying the Shared Accommodations shall be visibly posted in a conspicuous location inside the building for emergency personnel use.

168.6 M. Interior signage. Directional signage shall be placed within the building to direct emergency personnel to bedrooms, mechanical areas, and storage spaces; and all interior doors shall be labeled to indicate the use of the space. The Fire Chief, or his designee, shall approve the location of the signage.

By signing this application, I certify that I agree to comply with the rules and regulations contained in Chapter 168 of the Bar Harbor Town Code and all applicable standards of the Bar Harbor Town Code. I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____

Printed Name: _____