

Short-Term Rental (STR) Insurance Affidavit

STR Property Address: Owner's Name(s) or Name of Ownership:		
is rented or advertised thro Vail, I (we) must obtain sep	ugh any channel other than the ma arate insurance covering short-ter) must provide proof of valid insur	nowledge that if the property listed above arketplaces affirmed by the Town of m rental activity in a minimum amount of rance to the Town of Vail prior to any such
FURTHER AFFIANT SAYET	H NOT	
Owner Signature	Printed Name	Date
Owner Signature	Printed Name	Date
Subscribed and affirmed before me in	the county of,	
State of, this	day of, 20	
(Notary's official signature)		Notary Seal
(Commission Expiration)		