



Resort Village of Pasqua Lake

Box 1759
FORT Qu'APPELLE SK S0G 1S0

306-332-0050
office@rvpl.ca
www.rvpl.ca

SHORT-TERM RENTAL PERMIT APPLICATION

Owner	Name		
	If applicant is not the owner: Authorized Applicant Business or Lessee	Mailing Address	Phone Number ()
		Email	
Property Information	Business Name		
	Contact Name	Phone Number ()	
	Mailing Address	Email	
Check-List	Civic Address	LLD: Lot Block Plan	
	Platforms for listing (eg: AirBnB, VRBO)		
Declaration	Approved fire inspection report <input type="checkbox"/> Yes <input type="checkbox"/> No Maximum two persons per bedroom <input type="checkbox"/> Yes <input type="checkbox"/> No Compliance with all municipal bylaws, including <i>Nuisance Bylaw</i> <input type="checkbox"/> Yes <input type="checkbox"/> No One off street parking space per guest room <input type="checkbox"/> Yes <input type="checkbox"/> No Proof of authorization from owner (if applicable) <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Declaration: I, _____ of _____ in the province of _____, _____, agree to comply with all terms in Bylaw 23-2025, <i>The Short-Term Rental Bylaw</i> of the Resort Village of Pasqua Lake, and acknowledge the responsibility to ensure compliance with all elements of Bylaw 23-2025.		
	Date:	Signature	
Permit in effect for : 20_____			

OFFICE USE ONLY

Date Received: _____

Receipt Number: _____