



GOVERNMENT OF BERMUDA

Consumer Affairs

Rego Building, 75 Reid Street, Third Floor, Hamilton, HM 12

Email: hamarshall@gov.bm

VACATION RENTAL CERTIFICATE

Owner Information

Property Owner Name(s):

Bermudian: Yes No

Email Address:

Telephone Number:

(Home)

(Work)

(Cell)

Property Owner Full Address:

I confirm that I am the Property Owner: Yes No

Property Management or Agency Information (if applicable)

Company Name:

Manager or Agent Name:

Email Address:

Telephone Number:

(Home)

(Work)

(Cell)

I have permission from the Property Owner to manage or act as an agent for this property: Yes No

Vacation Rental Property Information

Vacation Rental Property Full Address:

Assessment Number(s):

Annual Rental Value:

Phone Number Associated with Property:

Property is (tick which applies):

1. Entire house/apartment or condo; or
2. Shared house/apartment or condo with other guests; or
3. Shared space in an owner occupied home

Bermuda Tourism Authority Vacation Rental Fee will be collected and remitted by: Property Owner:

Property Manager: Other:

Listing posted on (Website(s)):

Title of listing

Total # of beds:

Total # of bathrooms:

Maximum number of guests that can be accommodated on property:

Average nightly rate: \$ (BMD)

Is the Vacation Rental Unit covered under insurance? Yes No

Please check all that apply to your Vacation Rental Property:

- Property is in good condition (fixtures, fittings, furniture and equipment)
- Property has fire extinguisher(s)
- Property has First Aid Kit plus Personal Protective Equipment (PPE) for each guest / family
- Each bedroom has a fire alarm or smoke detector
- Each bedroom has at least one (1) window or glass door that a guest can open
- Each bedroom has one (1) toilet for every 4 people in room [over age of 12]
- Wheelchair Accessible
- Allows Pets

- Offers Breakfast
- Fresh drinking water from tap
- House Rules are provided
- Information Folder is provided (contains transportation info, emergency contact info, tourism literature)
- Telephone land line or cell phone, with current year phone book is provided
- Safety tips flyer is available in each guest room on night stand or information folder [can be collected from the Tourism Regulation and Policy Unit or download from the BTA website]
- Bermuda map, what to see and do in Bermuda literature is available in each guest room [can be collected from your nearest Visitor Information Centre]
- New guests are personally met upon arrival
- A key is left for new guest(s) upon arrival

Please tick all that apply to your Vacation Rental Property:

Property is equipped with:

- Bedding Bath towels Hand towels for number of guests accommodated
- TV Free Wi-Fi
- Pots Pans Dishes Cutlery Glasses Fridges Stove Microwave Toaster Oven
- Shampoo Hangers Hairdryer Iron Ironing Board Desk or Workspace
- Air conditioning Heating
- Washer Dryer
- Pool Beach Access
- Twizy Charging Station

Please check to confirm you agree:

- To provide the proof of payment of the Vacation Rental (Application and Registration Fee) from the Accountant General
- To register with Consumer Affairs, Rego Building, 75 Reid Street, Hamilton, HM 12.
- To pay [directly, though my vacation rental agent, or other] the 4.50% Vacation Rental Fee (based on my nightly rack rates) to the Bermuda Tourism Authority
- To allow Consumer Affairs, Health and Fire Inspectors access to your property if required by the Ministry. The Minister reserves the right to inspect as needed.

I, hereby, declare that the information I have provided is true and correct. I understand that any misrepresentation made by me or by my representative may render my application invalid.

Signed by:

Date: