

Short Term Rental – Consent for Alternate (Emergency) Contact Persons

I, _____ [name], consent to _____ [name of the short-term rental operator applicant] providing my full name and phone number to the City of Toronto for the purposes of including me as an alternate (emergency) contact person for the short-term rental operator.

I understand that the information collected by the City will be used to contact me in the role of the alternate (emergency) contact persons in the event that problems arise with the short-term rental and the operator is not available.

This information is collected under the authority of ss. 7, 8, 86, and 94 of the City of Toronto Act, 2006 and Toronto Municipal Code Chapter 547, Licensing and Registration of Short-Term Rentals.

Any questions concerning this collection may be directed to the Manager, Investigation Services, 1530 Markham Road, 3rd Floor, Toronto, Ontario, M1B 3M4, or by telephone at: 416-395-6600.

Signature (Alternate Contact) _____ Date _____