



**Planning & Development Services Department  
Building & By-Law Services Division**

32 Mill Street  
Thornbury, ON N0H 2P0  
Tel.: (519) 599-3131, ext. 240  
Toll Free: 1-888-258-6867  
Fax: (519) 599-7723

[STAlcences@thebluemountains.ca](mailto:STAlcences@thebluemountains.ca)  
[www.thebluemountains.ca](http://www.thebluemountains.ca)

**Short Term Accommodation (STA) Licence  
RESPONSIBLE PERSON CONSENT AND ACKNOWLEDGEMENT FORM  
STA Licensing By-Law 2013-50**

Form BL826

**Date:**

<b>NAME:</b>	
<b>HOME ADDRESS:</b>	
<b>TELEPHONE NUMBER (S):</b>	
<b>EMAIL:</b>	
<b>STA PREMISES ADDRESS:</b>	

**Consent to Release Personal Information:**

I hereby consent to the use of the personal information provided above by The Town of The Blue Mountains and that my name, phone number(s) and email address will be recorded on the STA licence placard and posted on the Town's STA website in accordance with s. 4.29 of the STA Licensing By-law.

**Acknowledgement:**

In consideration of acceptance of this Responsible Person Consent and Acknowledgment Form, I, my heirs, next of kin, executors, administrators and assigns **HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE** The Town of Blue Mountains and its employees **FROM ANY AND ALL** claims, demands, damages, costs, expenses, actions and cause of action, whether in law or equity in respect of death, injury, loss or damage to myself or property, arising or to arise by reason of my capacity as Responsible Person.

**Accuracy Confirmation:**

I hereby confirm that the information I have entered on this form is correct and true.

\_\_\_\_\_  
Signature – Responsible Person

\_\_\_\_\_  
Date