



SHORT TERM RENTAL OPERATOR EMERGENCY CONTACT

NAME* : _____

PHONE NUMBER* : _____

EMAIL ADDRESS* : _____

PROPERTY ADDRESS: _____

***Required fields**

Emergency & Non-Emergency Resources for Guests

<p>For emergency calls regarding:</p> <ul style="list-style-type: none">• Reporting a fire• Reporting a crime• Seeking emergency medical assistance <p>Call 911</p>	<p>For non-emergency calls regarding:</p> <ul style="list-style-type: none">• Noise concerns• Parking issues• Business Licence concerns <p>Call 311</p>
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