

Short Term Home Rental License Application

☐ License Application Fee: \$750.00 (Fee includes Health & Life Safety inspection) Date Paid: ______ Receipt No.: _____ Parcel #: _____ Property Owner to complete sections A-F. A. Property Owner's Information (To be completed by Property Owner) 1. Site Address of Short-Term Home Rental: 2. Property owner's name: ____ 3. Property owner's address (if not primary residence): 4. Property owner's phone number: ______ Public phone number: _____ 5. Property owner's email: _____ B. Operator's (Property Manager) information (To be completed by Property Owner only if applicable) 1. Operator's name: 2. Operator's address: ______ 3. Operator's phone number: ______ Public phone number: _____ 4. Operator's email: C. Property information 1. Number of legal bedrooms? 2. Number of bedrooms to be offered to guests? ______ Plus (1) Person per unit. 3. Maximum number of guests allowed per Ordinance: 4. Are the designated parking areas in a garage or improved surfaces? Yes No 5. I agree to keep a vehicle registration log of all guests' vehicles which includes, guests name, vehicle license plate number, make/ model, and provide it to the city within 48 hours if requested? 6. Will guest boats and/or other trailers/RVs be allowed? Yes 7. Have any exterior home alterations been done, or planned, to accommodate the Short-Term Home Rental (other than extra parking spaces for guests)? Yes If yes, please explain:



D. Em	ergency Contact Information			
Emerg	gency Contact Name:			
Emergency Contact Phone Number:		Emergency Contact Email Address:	Emergency Contact Email Address:	
Signat	ture Required			
Signature:		Title:	Date \$	Signed:
E. List	ing Information: (To be completed by	Property Owner)		
1. On	which websites will the Short-Term Ho	me Rental be listed?		
2. Wil	I the Short-Term Home Rental be listed	or advertised anywhere else? If so,		
F. Req	uired attachments: (To be completed	by Property Owner)		
□ 1.□ 2.	guests will be allowed to use, includin sauna.	g, but not limited to, deck/patio, bar	beque grill, recre	eational fire, or
☐ 3.	A copy of neighbor notification letter "Welcome Letter" to guests.	required by Ordinance Section 23-3ફ	g, along with "Gue	est Disclosure" or
4 .	\$750.00 payment for license applicati	on and initial inspection.		
□ 5.	Is the STR connected to the City of Cro	osslake Municipal Sanitary Sewer Sys	stem? Yes	No
□ 6.	If STR is not connected to the City of Cinstallation within the past 5 years or three (3) years. The certificate of instanumber of bedrooms indicated on the	a copy of a compliance inspection wallation must show that the system w	hich was perform	ned within the past



G. Signatures: (To be completed by Property Owner)

If applicable:

By signing this application form, I certify that to the best of my knowledge the property meets, and will be operated
according to, the standards found in City Code.

Signature		
Owners Authorized Agent (Property Manager):	Date:	

Owners Authorized Agent (Property Manager): _____