

**OFFICE USE ONLY**

Permit #: \_\_\_\_\_ Date Received: \_\_\_\_\_  
Issue Date: \_\_\_\_\_ Date of Public Notice: \_\_\_\_\_  
Expiration Date: January 31 \_\_\_\_\_ Date of Action: \_\_\_\_\_  
Board Decision: \_\_\_\_\_



## BROWN TOWNSHIP SHORT-TERM RENTAL APPLICATION

NEW  RENEWAL  HOSTED  UNHOSTED.  INFO UPDATE

### APPLICANT – PROPERTY OWNER OR PROPERTY OCCUPANT INFORMATION

PLEASE CHECK CORRECT APPLICANT TYPE

PERMANENT OCCUPANT  OWNER

|  |                                       |      |                        |
|--|---------------------------------------|------|------------------------|
| Applicant's Full Name:                 |                                       |      | <b>OFFICE USE ONLY</b> |
| Mailing Address:                       |                                       |      |                        |
| City:                                  | State:                                | Zip: |                        |
| Phone:                                 | E-mail:                               |      |                        |
| Business Name (if applicable):         |                                       |      |                        |
| Business Address (where incorporated): |                                       |      |                        |
| Entity/Corporation #:                  | Applicant's Relationship to Business: |      |                        |

### SHORT-TERM PROPERTY LOCATION INFORMATION

|                                      |          |                           |
|--------------------------------------|----------|---------------------------|
| Street Address:                      | Ste/Apt: | Parcel No:                |
| City:                                | State:   | Zip:                      |
| Number of Guestrooms Available:      |          | Maximum Occupancy Number: |
| Number of Off-Street Parking spaces: |          |                           |

### IF DIFFERENT FROM APPLICANT – SHORT-TERM RENTAL PROPERTY MANAGEMENT

|   |         |                        |
|---|---------|------------------------|
| Host Information:                         |         |                        |
| Short-Term Property Management Company:   |         | <b>OFFICE USE ONLY</b> |
| Short-Term Property Management Rep/Agent: |         |                        |
| Mailing Address:                          |         |                        |
| City:                                     | State:  | Zip:                   |
| Phone:                                    | E-mail: |                        |

### 24-HOUR LOCAL POINT OF CONTACT INFORMATION

|                      |         |      |                        |
|----------------------|---------|------|------------------------|
| Full Name:           |         |      | <b>OFFICE USE ONLY</b> |
| Residential Address: |         |      |                        |
| City:                | State:  | Zip: |                        |
| Phone:               | E-mail: |      |                        |

**ITEMS REQUIRED FOR A COMPLETE APPLICATION**

- Applicant to submit the Short-Term Rental Application form (10 copies of each) as well as any other necessary information to support the request.
- Complete copy of building plans no larger than 11 X 17
- Site Plan / Plot Plan which must show the layout of your property generally to scale and must include the following: all property lines and dimensions including setbacks, all existing buildings, driveway(s), and other prominent site features.
- Copy of Health District letter of operational onsite treatment system, or Regional Sewer district sanitary service connection.

**INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

No proposed improvements shall be made relative to issuance or approval of Short-Term Rental permit. Any property improvements shall be approved via Zoning Permit, and or Board of Zoning Appeals process relative to proposed site improvements. Applicant and property owners certify that all information contained herein is true and accurate and is submitted to induce the issuance of the requested Short Term Rental Permit. If any changes are made to this application or the information submitted has changed the zoning department must be notified and may result in reapplication. Applicant agrees to be bound by the provisions of the zoning resolution of Brown Township and understands that any deviation from such resolution will result in the maximum penalty allowable by law.

**OWNER/APPLICANT ACKNOWLEDGEMENT**

I hereby acknowledge that I am requesting a Short-Term Rental permit in accordance with the Brown Township Zoning Resolution; that I have provided all required submittal materials; that the information contained herein, as well as all supplemental materials being submitted is true and correct; I am responsible for supplying necessary information to support my request.

**OWNER/APPLICANT SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_