PARCEL #
 Age
 Application:

 041-_____

 New:_____ Renewal:_____

VILLAGE OF EMPIRE SHORT TERM RENTAL APPLICATION FORM

Property Name / DBA:			
Property Address:			
Owner Name:			
Owner Address:			
City:	State:	Zip:	
Phone:	_Email:		
Local 24-hour contact person (owner or agent) 1. Authorized by the Owner to take all remedial action 2. Available to respond to issues at the property			
Name:	Phone:		
Owner Certification:			

By signing this Application, I certify that:

- 1. I have read the Village of Empire Short-Term Rental Ordinance and understand the requirements, regulations, violations and penalties contained in the Ordinance; and,
- 2. I have the legal authority to sign this Application; and,
- 3. This STR has bedrooms/sleeping areas to justify the stated maximum occupancy; and,
- 4. This STR has working (and not expired) "Class ABC" fire extinguishers on each floor; and,
- 5. This STR has egress from each bedroom to the exterior of the dwelling unit; and,
- 6. I have posted the Good Neighbor policy; and,
- 7. The information contained on this Application and Submittals is true to the best of my knowledge. I understand that submittal of false information on this Application is a violation of the Ordinance.
- 8. I will notify the Village of Empire if there are any changes to information on this Registration form; and,

9. With granting of a Short-Term Rental License I will indemnify the Village of Empire, its officers, agents, employees, and the Council against any and all loss, injury, or damage whatsoever arising out of or in any way connected with this registration and the activities associated with a license approved pursuant to this registration.

Print Name of Property Owner	Signature of Property Owner
Date:	_
	FICE USE ONLY
DATE REC'D	_ FEE PAID
DATE ACCEPTED:	LICENSE #:
APPROVED BY:	