

City of Newaygo
APPLICATION FOR A LICENSE TO OPERATE A SHORT-TERM RENTAL

28 State Rd, PO Box 308, Newaygo MI 49337
(231) 652-1657 office@newaygo.gov

Instructions: Please submit application and fee annually. License expires March 31 each year. Failure to apply to operate a short-term rental (STR) on an annual basis may result in no longer being able to operate. Complete this application and submit it, along with required attachments to the address or email above. Complete one application for each STR dwelling unit. Incomplete applications will not be processed. Fees must be submitted prior to inspection. Note, a Short-Term Rental (STR) application is NOT a rental registration certificate. A rental registration must be applied for and the property inspected before the property is rented, either as a long-term rental, or an STR.

RENTAL UNIT INFORMATION

Street Address of STR: _____

City, State, Zip: _____

Parcel ID #: _____ Zoning District: _____ # of Dwelling units on property: _____

of Bedrooms: _____ # of finished floors: _____ # of Parking Spaces for renters: _____

PROPERTY OWNER INFORMATION

Name of Property Owner: _____
(If a business, also include name of contact person)

Street Address: _____

City, State, Zip: _____

Telephone #: _____ Email: _____

APPLICANT INFORMATION

Name of Applicant: _____

Street Address: _____

City, State, Zip: _____

Telephone #: _____ Email: _____

LOCAL AGENT INFORMATION (Designated Representative)

The landowner shall provide to the City a physical address and a current 24-hour working phone number and email or texting address of the current designated representative to the City. Said designated representative must be available during the rental period and reside within 30 miles of the dwelling unit. Contact information of the designated representative must also be made available in writing to the occupants of the STR and must be displayed prominently in the main part of the dwelling. The designated representative must respond to City or occupant inquiries/communications within 15 minutes of receiving a call, email, text message, or similar communication.

Name of Local Agent: _____

Street Address: _____

City, State, Zip: _____

Telephone/Text #: _____ Email: _____

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REQUIRED ATTACHMENTS

1. Floor plan
2. Site plan showing the number and location of parking for guests
3. Copy of current property deed
4. Interior and exterior photos of dwelling unit
5. Certificate of insurance covering any issues at the STR (i.e. bodily injury, property damage, etc.)
6. Application and Inspection fee if first time application. If this application is for license renewal, then license renewal fee and inspection fee.

CERTIFICATIONS AND SIGNATURES

The signer(s) of this form does hereby state, warrant, certify, and affirm the following:

1. The information and documents provided are accurate and true.
2. I understand that all dwelling units shall be inspected for compliance as set forth in applicable ordinances and that the dwelling can only be used as a STR once the City issued STR Certificate is issued and posted on the unit, per applicable City ordinance. I consent to inspections by the City and will make the dwelling unit available to inspections upon request.
3. Smoke detectors/alarms, fire extinguishers, and carbon monoxide detectors will be installed and maintained per City of Newaygo ordinances.
4. A copy of the City's Good Neighbor materials will be provided to the renters each time the dwelling unit is rented.
5. I understand that if the annual inspection does not pass and a reinspection is needed, a \$100 reinspection fee will be required prior to the reinspection.
6. I understand that if I miss my scheduled inspection or need to cancel/reschedule my inspection it must be done with 24 hours' notice or a no-show fee of \$100 will need to be paid prior to the new inspection being scheduled.
7. I have read and will comply with the City's ordinance/rules relating to STR's. I also understand the Licensee and tenants are subject to all City of Newaygo Ordinances.
8. A schematic drawing, approved by the City, will be supplied to renters as to where they can legally park and how many spaces are available for their use.
9. I understand and acknowledge that the Licensee is responsible for any and all Tenant violations or fines.
10. I understand and acknowledge that STR licenses expire on March 31 each year and renewal processes, timelines, and any required submissions are fully the responsibility of the property owner.

By signing, the owner of the dwelling unit certifies that the above statements are true. Statements found to be falsified on this application will be grounds to revoke the STR license. I further understand the City reserves the right to deny, suspend, or revoke a license for short-term rental operations per City Ordinances as amended.

Print name of Owner (or if a business or Trust, the name of the Authorized Signer):

Signature: _____ Date: _____

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STR property address: _____

License Approved ____ Wait list approved ____ Denied ____

License #: _____ License expires: _____ Max # of tenants: _____

Reason for denial: _____

City Manager or designee

Date