



Date _____	Received by _____
Tracking Number _____	

SHORT TERM RENTAL AND BED & BREAKFAST APPEAL APPLICATION

Applications must be complete and submitted in person. Faxed, emailed or incomplete applications will not be accepted. Reviews take up to 60 days. As part of the review, the City Planning Commission staff will evaluate the appeal against the standards in Article 19, Section 19.4.A. The City Planning Commission staff will forward its recommendation to the City Council, which will take action on the request.

Property Location _____
 Square Number _____ Lot Number _____ Tax Bill Number _____

APPLICANT INFORMATION

Applicant Identity: Property Owner Agent
 Applicant Name _____
 Applicant Address _____
 City _____ State _____ Zip _____
 Applicant Contact Number _____ Email _____

PROPERTY OWNER INFORMATION SAME AS ABOVE

Property Owner Name _____
 Property Owner Address _____
 City _____ State _____ Zip _____
 Property Owner Contact Number _____ Email _____

PROJECT DESCRIPTION

ADDITIONAL INFORMATION

License Number(s) (If applicable) _____ Number of Off-street Parking Spaces _____

Type of Building	Residential (Single Family)	Residential (Two Family/double)	Apartment or Unit in Multi-Family Building	Condo
Type of Rental	Accessory 1 side of a Double	Accessory Partial Unit	Bed & Breakfast	Commercial

Number of Bedrooms in Unit: _____ Number of Bedrooms to be Rented: _____
 Maximum number of Occupants per Bedroom: _____
 List all platforms you rent/will be renting this property through (e.g. AirBnb, VRBO, HomeAway, etc):

Building/Construction
Related Permit



Date	_____
Tracking Number	_____

SHORT TERM RENTAL AND BED & BREAKFAST APPEAL APPLICATION

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SHORT TERM RENTAL AND BED & BREAKFAST APPEAL APPLICATION

FEES

Short Term Rental Appeal	\$1,000
Bed & Breakfast Appeal	\$1,000

ACKNOWLEDGMENTS

I (We) hereby affirm that ownership and property information presented on this application is current and accurate and, further, that the undersigned meets the requirements of Article 4 of the Comprehensive Zoning Ordinance to submit this application. I (We) acknowledge that inaccurate or incomplete ownership, improper authorization, or property identification will make this application null and void. I (We) the undersigned owner or authorized agent of the area of land described above, hereby submit for you approval the above stated request.

Applicant Name _____ Date _____

Applicant Signature _____

Property Owner Name _____ Date _____

Property Owner Signature* _____

*If ownership is joint, each owner must be listed. If ownership is a partnership, the Partnership Agreement must be included. If ownership is a corporation, Articles of Incorporation and a Board Resolution authorizing an individual or agent to sign on its behalf or if ownership is a LLC, Articles of Organization and legal documentation authorizing an individual or agent to sign on its behalf must be included. If necessary, submit proof of ownership documents, such as copies of the recorded act of sale, act of exchange, act of donation, cash sale or deed. Appropriate documentation is also required for successions.