

Short-Term Rental Application

*Short Term Rental certificates are non-transferable. New ownership will require a new application.

*A separate application and certificate is required for all property used as a short-term rentals.

Da	te Received:		Certificate Number:		
	Complete the Attach proof o				
	Rental Unit Information				
	Street address:				
-	Square Footage of STR	Number of Bedrooms (5 maximum)	Maximum Number of Occupants (16 people maximum)	Number of Parking spaces (1 per bedroom minimum)	
-	Location of Parking Spaces (please describe location of parking spaces)				
Ī	Sewage Management		Sewer 🗆	Septic □	
	This STR unit has a swimming pool on the property:		Yes 🗆	№ □	
	This STR unit is part of a Home Owners Association: Yes No *if Yes, provide a written statement from the HOA confirming the HOA does not prohibit short term rentals				
	This STR unit is Owner-O	ccupied:	Yes 🗆	No □	
	If Yes, is this STR unit you	ur principal place of residence?	Yes 🗆	No 🗆	



Property Owner Information

Street Address of Rental Unit		
Please use a separate sheet, one f	for each person holding 20% or more	ownership of the short-term
Owner Name		
Owner Address		
City / State	ZIP:	
Phone / email:		
	property owner of the above referenced she article III, Chapter 18, beginning in Section full compliance with the ordinance.	
Signature of Owner	Date	
Print Name		
Subscribed and sworn before me on this	day of	, 20
Signature of Notary Public		



Local Contact Information Local Contact Name 24-hour contact Phone # Email: Copy of ID Required Age: Local Contact Acknowledgement _____ understand and agree to perform the duties as the 24-hour Local Contact as stated in Cherokee County Code of Ordinances Section 18-380 adopted September 7, 2021. Signature Date Subscribed and sworn before me on this ______ day of ______, 20_____. **Notary Public** My Commission Expires **SEAL**

Date