## Regular Short-Term Rental Permit Application

0610-Permit Number:

THIS APPLICATION IS FOR:	New/Initial Application	ial Application   □ Renewal of Permit #			
This type of permit allows STR's to advertise/operate for 180-consecutive days in a 365-day period with a 7- day minimum stay requirement. Lodging marketplace calendars must block renters from making reservations that are not compliant with the minimum duration of stay requirements. Lodging marketplace calendars must block renters from making reservations outside of the allowable 180-day consecutive period. Operators must ensure that lodging marketplaces disable any dynamic scheduling that fills gaps in the rental calendar with stays that do not meet the 7-day minimum.					
PROPERTY INFORMATION					
Property Address		Minimum # of Consecutive Nights for STR	6 nights/7 days		
1 <sup>st</sup> day of STR operation in		# of Bedrooms			
180-day permit period		for STR			
# of Parking Spaces on Property for Renter Use		Max Occupancy (2/bedroom)			
· ·	TION (Names of all officers of co		rganization, trust)		
Owner (1) Name	· · ·				
Mailing Address					
Telephone					
E-Mail					
Owner (2) Name					
Mailing Address					
Telephone					
E-Mail					
Owner (3) Name					
Mailing Address					
Telephone					
E-Mail					
<b>OPERATOR INFORMATION</b> (M	lust be a person and not an orga	inization)			
Operator Name					
Primary Residence Address					
Mailing Address					
Telephone					
E-Mail					
LIST ALL AD PLATFORMS					

REQUIREMENTS					
STR permit number, minimum duration of stay, maximum occupancy limit, and number of designated parking spaces must appear in all advertisements and listings.					
The STR permit is non-transferable and does not authorize any person, other than the person named therein, to operate a short-term rental home in the residential dwelling.					
A quarterly report, which lists the dates of stay, number of guests for each stay, and a listing of all websites and places where the operator has advertised the short-term rental is required by February 1, May 1, August 1, and November 1 for the preceding calendar quarter.					
SUBMITTAL REQUIREMENTS					
STR application and permit fee paid in full					
Site plan indicating p	arking spaces for renter use				
CERTIFICATION OF OPI	ERATOR				
I certify that all information provided on this application is true and accurate. I understand that failure to comply with any applicable provisions of Ordinance 11-24, including providing false information on a permit application, is grounds for revocation of my permit, and other enforcement measures. I have reviewed the Town of Dunn Ordinance 11-24 and I will operate in compliance with the Short-Term Rental regulations in the Town of Dunn. I understand the submission of the application by the Town does not constitute the issuance of a permit and that a valid short-term rental permit must be issued before the property can be offered, advertised, or rented.					
Signature					
Printed Name					
Date					

FOR OFFICE USE ONLY						
Permit Application:	🗆 Denied	□ Approved				
Permit Conditions:						
180-Day STR Period:						
Payment Information:						
Staff Signature:			Date:			