

SHORT TERM RENTAL ANNUAL OPERATING APPLICATION

PAUPACK TOWNSHIP, WAYNE COUNTY PA

EXISTING PERMIT #		TAX ID #	
PROPERTY OWNER			
NAME			
MAILING ADDRESS			
CITY	STATE	ZIP	
PHONE #			
EMAIL			
24 HOUR CONTACT PERSON			
PHONE #			
NAME OF COMMUNITY ASSOCIATION			
MAILING ADDRESS			
PROPERTY ADDRESS			
ADVERTISING AGENCY			
LISTING LINK			
APPLICANT/OWNER CERTIFICATION			

I (We) hereby represent that the information provided herein and documents submitted herewith are true and correct and request that a Short Term Rental Permit be issued in reliance thereon. Further, I (We) have read all regulations pertaining to the operation of a Short Term Rental and agree to comply with them and the Paupack Township Short Term Rental Ordinance. Signing of this application authorizes the Township Compliance Officer to perform all inspections required to ensure compliance with the Paupack Township Short Term Rental Ordinance.

OWNER(S) SIGNATURE:	DATE
CO-OWNER:	DATE

APPLICATION MUST BE SUBMITTED WITHIN THIRTY(30) DAYS OF EXPIRATION DATE

RENEWAL APPLICATION FEE: \$500.00 - CHECK PAYABLE TO PAUPACK TOWNSHIP

COMPLIANCE OFFICER USE ONLY

DATE APPLICATION RECEIVED: _____ FEE: \$ _____ CHECK# _____ CASH _____

APPLICATION COMPLETE (____) APPLICATION INCOMPLETE (____)

REASONS: _____

PERMIT ISSUED: (____) PERMIT DENIED: (____)

REASONS: _____

DATE ISSUED: _____

COMPLIANCE OFFICER _____

There is a \$50.00 charge for re-inspections

RETURN COMPLETED APPLICATION AND ALL SUPPORTING DOCUMENTATION TO:

PAUPACK TOWNSHIP SHORT TERM RENTAL COMPLIANCE OFFICER

25 DANIELS ROAD
LAKEVILLE, PA 18438

PHONE: (570) 226-3115
FAX: (570) 226-4257

SHORT TERM RENTAL RENEWAL APPLICATION CHECKLIST

EXISTING PERMIT #

THE FOLLOWING MUST BE INCLUDED WITH THE APPLICATION

- _____ SUBMIT REQUIRED RENEWAL APPLICATION FEE (500.00)
- _____ COPY OF SHORT TERM RENTAL APPLICATION
- _____ COPY OF CURRENT DEED/DOCUMENT THAT ESTABLISHES APPLICANTS OWNERSHIP
- _____ COPY OF HOMEOWNER/RENTAL PROPERTY INSURANCE POLICY
- _____ COPY OF INSURANCE DECLARATION/CERTIFICATE PAGE (SHOWING PAUPACK TOWNSHIP AND THE COMMUNITY (HOA/POA) AS ADDITIONALLY INSURED WITH A MINIMUM OF \$1,000,000.00 PER OCCURANCE/\$3,000,000.00 AGGREGATE PER POLICY TERM
- _____ FOR ON-LOT SEWAGE DISPOSAL SYSTEMS: COPY OF RECEIPT SHOWING SYSTEM HAS BEEN SERVICED AND PUMPED OUT WITHIN LAST TWO(2) YEARS