

Short Term Rental Permit Application

Section One: Site Information	
Site Address:	
Is this the applicant's primary residence?* Yes No	
<small>*If "no", lodging can only be provided for 90 days aggregate (total) per calendar year. Over 90 days requires a conditional use permit.</small>	
OFFICIAL USE ONLY	
<u>Assessor Parcel Number:</u>	<u>Zone:</u>

Section Two: Applicant Info/Consent of Property Owner	
Applicant Name:	
Applicant Phone:	
Applicant Email:	
Responsible Person:	Emergency Contact Number:
If the responsible person is not the property owner, property owner must acknowledge requirements <i>Applications will not be accepted or processed without signed property owner consent</i>	
Property Owner Name:	
Property Owner Signature:	Date:

Section Three: Rules and Regulations	
I understand the following rules and regulations regarding short term rentals (initial):	
	I must have an active Business Operation Tax Account with the City.
	I am responsible for paying Transient Occupancy Tax on revenue generated from short term rent
	A maximum of six people can rent at any one time
	All applicable parking regulations apply to short term renters
	Complaints related to the short term rental property will go to 311

Section Four: Information Provided	
I have been provided the following information by the City of Sacramento (initial):	
	Transient Occupancy Tax documents
	Noise ordinance 8.68 http://www.qcode.us/codes/sacramento/

Section Five: Agreement and Signature	
I hereby certify under penalty of perjury that the answers I have given are true and correct to the best of my knowledge and belief, and I understand and agree that any false or misleading answer will result in denial or revocation of any permit. Further, the City is hereby authorized to seek and verify information contained in this application. I understand verification of the accuracy of the application information is a matter of public record and may be made available to interested parties upon request.	
Applicant Signature:	Date:

OFFICIAL USE ONLY		
BOT account verified	YES	NO
Primary residence verified	YES	NO
Staff Name:		