

**SHORT-TERM RENTAL REGISTRATION FORM**

*Registration Form **Must** Accompany Payment  
Property Owner I.D. Required with Registration*

**SECTION 1 – RENTAL PROPERTY INFORMATION**

Rental Property Address: \_\_\_\_\_

Number of Bedrooms: \_\_\_\_\_ Number of occupied floors: \_\_\_\_\_

Number bathrooms: \_\_\_\_\_ Size of dwelling unit: \_\_\_\_\_ square feet

Maximum number of occupants: \_\_\_\_\_

Number of off-street parking spaces on the property: \_\_\_\_\_ Months of operation: \_\_\_\_\_

Term of typical anticipated reservation: \_\_\_\_\_ days Advertising Venue: \_\_\_\_\_  
Ex: AirBnB, VRBO, etc.

**Short-term rentals must be registered or renewed at least fifteen days prior to the first rental each year.**

New Rental: Yes \_\_\_\_\_ No \_\_\_\_\_

Renewal: Yes \_\_\_\_\_ No \_\_\_\_\_

**SECTION 2 – PROPERTY OWNER INFORMATION**

Owner's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Contact Person (if owner is a company): \_\_\_\_\_

Owner's Address: \_\_\_\_\_  
Street City State Zip

Email Address \_\_\_\_\_ Fax Number: \_\_\_\_\_

Would like rental correspondence mailed to:  Property Owner  Owner's Agent

**A local agent is required if the property owner does not live within 20 miles of the short-term rental property. The local agent is required to live or work within 20 miles of the short-term rental and shall be verified by Township staff.**

Agent's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Contact Person (if agent is a company): \_\_\_\_\_

Agent's Address: \_\_\_\_\_  
Street City State Zip

Email Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**SECTION 3 – ADDITIONAL REQUIRED INFORMATION**

The following items shall also be submitted with this application:

- The rental registration fee.  Sketch of the floor plan of the dwelling unit
- A copy of the rental agreement.

***Please sign the affidavit on the back of this sheet.***

**ONTWA TOWNSHIP**  
**SHORT TERM RENTAL REGISTRATION**

**AFFIDAVIT**

The signer(s) of this form does hereby state, warrant, certify, and affirm the following:

1. All the information on the attached registration form is true and correct to the best of my knowledge.
2. This registration form is accurate and complete to the best of my knowledge.
3. Each dwelling unit will have an operating smoke detector in each bedroom and an operating carbon monoxide detector on each floor. These appliances will be maintained every ninety (90) days at a minimum.
4. I consent to inspections of the dwelling unit by the township and will make the dwelling unit available for inspections upon request pursuant to the Ontwa Township Short Term Rental Ordinance.
5. A copy of the Township's regulations for short-term rentals will be provided to the renters each time the dwelling unit is rented.

By signing below, the owner/agent of the dwelling unit certifies that the above statements are true and correct to the best of their knowledge. Statements found to be falsified on this application and affidavit will be grounds to revoke the rental permit.

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Type or Print Your Name Here: \_\_\_\_\_

*NOTICE: The issuance of a certificate of registration shall in no way impact the zoning of the subject property, and shall not prevent the Township from enforcing Zoning Ordinance regulations and limitations on said property, or any other applicable ordinance of the Township.*