

## SHORT TERM RENTAL BUSINESS REGISTRATION FORM

BUSINESS INFORMATION:				
Applicant Legal Name or B	usiness Name:			
Applicant Physical Address	x			
Mailing Address (if different	t):			
	City	. State		
	ation □ Partnership □ Individu lember) □ Limited Liability Co	al/Sole Proprietorship □Li	mited Liability Comp	any (LLC)
Owner/Entity Federal Identific	cation or Social Security#			
Note: Attach a separate	sheet detailing information if the	ere are additional owners fo	r theproperty	
CONTACT INFORMATION:				
Name/Title:				
Business Phone #	Cell Phone #:	Email:		
Property address (including a Date Property First Rented:_  o If you answ Department Copy of you Auburn but on If you answ answer the Do you have a property man and contact information for the If yes, please list the name(s Short-Term Non-Primary Remust accompany a Zoning Date of Including the Including I		property as your primary residence as a HOMESTAY. Please contour (334) 501-3040 for a Homest accompany this completed as SHORT-TERM NON-PRIMAR property?If answer YES, putc.) for bookings only?   Certificate to be issued by Aless before a City of Auburn by	ence?YES act the Auburn Plannin e Occupation Permit. A page to obtain a City of EY RENTAL (STNPR). Plan blease provide the name	g of ease ompleted form
FIRST YEAR LICENSE FEE	S: Rental Start Date Jan 1 <sup>st</sup> – \$105	Jun 30 <sup>th</sup>	Rental Start Date Afte	er July 1 <sup>st</sup>
	be submitted to the revenue department of th			evenue
	hly Lodging Tax is to be filed and		ental receipts.	
	declare that I have examined this fo ates that I take full responsibility for			
Signature of	of applicant	_	Date	