

CLARK TOWNSHIP Application for Short-Term Rental Permit



PROPERTY INFORMATION
Property Owner Name (print)
Applicant name (print, if other than Owner)
Mailing Address of Owner
Street & Number:
City, State, Zip:
Telephones/cell phones numbers:
Email:
EMERGENCY CONTACT NUMBER:
Mailing Address of Applicant
Street & Number:
City, State, Zip:
Telephones/cell phones numbers:
Email:
EMERGENCY CONTACT NUMBER:
Rental Address
Street & Number:
Community (Cedarville or Hessel):
Parcel tax number:
Total capacity of people using the rental:
Local Contact Representative Person (if different than Owner)
Name:
Street Address:
Community:
Telephone/cell phone numbers:
Email:
<b>FEE SCHEDULE</b> (January 1 is anniversary data. Ease are not prevented.)
FEE SCHEDULE (January 1 is anniversary date. Fees are not prorated.)

\$100 Non-Refundable Application Fee plus \$400 Annual Permit Fee

\$400 Annual Renewal Fee

\$500 Annual Renewal Fee if violations of Township ordinances or State laws occurred during the year. (Subject to appeal)

## **FACILITY INFORMATION**

# of bedrooms	_emergency egress windows per room:		
# of beds	_		
# of bathrooms:	_		
# of off-street parking space	s:		
Septic $\square$ or Sewer $\square$			
Water tested: (date)	Agency:		
Are pets allowed?			
# of fire extinguishers	locations:		
Access to lake on property; usable dock			

# **ATTACHMENTS REQUIRED**

 $\Box$  1. Proof of property ownership: property deed, lease agreement, or land contract.

 $\Box$  2. List of any restrictions on the property including access easement(s).

 $\Box$  3. Site plan with property lines including location of septic field, docks (if applicable), driveway, well, and parking area. **Property lines and corners must be clearly marked on site.** 

 $\Box$  4. Floor plan of facility with number of bedrooms to be occupied.

Owner's Signature:	 	
Date:		
Applicant's Signature	 	
Date		

#### **ADMINISTRATIVE USE & INFORMATION ONLY**

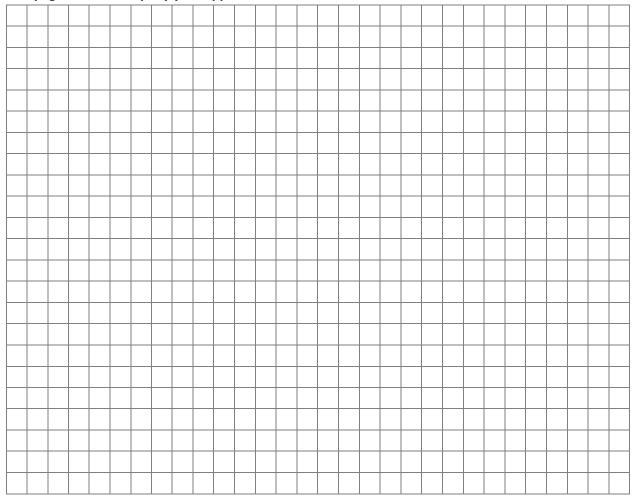
Permit Issue date:	Expiration date:
Application fee paid: Amount:	Date paid:
Permit fee paid:	Date paid:
Permit authorized by: (print name):	
Title:	
Signature:	
Date:	

Copies to: Owner/Applicant; Code Enforcement Officer; Supervisor office.

CLARK TOWNSHIP 207 N BLIND LINE RD PO BOX 367 CEDARVILLE, MI 49719 (906) 484-2672, FAX (906)-484-3199

**SITE PLAN:** Make a scale drawing below showing actual lines, angles, and dimensions of the structures and the parcel boundary to be used for the rental, the exact size (to scale) and location on the lot of all existing buildings, other structures, easements, parking areas, streets, and driveways, well, docks, and septic field.

#### This page must accompany your application.



#### NOTICE TO APPLICANT

The purpose of this grid to assist the Township in defining property boundary, uses, and structures which will be involved in the rental application.

The undersigned hereby agrees to abide by all Zoning, Building, and other Township ordinances, and regulations, and to comply with all parking, easements and other requirements requested by the Code Enforcement Officer.

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

Township Administration notes:

# **Short-Term Rental Facility Safety List**

The following items are meant to ensure the safety of the facility and guests. The list is not all inclusive but meant to guide the property owner to make their facility an optimal site for the health, safety, and welfare of their guests.

# Electrical

- $\Box$  ground fault receptacle(s) in bathroom
- $\hfill\square$  outlets in working condition, easily accessed
- $\Box$  all lights working
- $\hfill\square$  exterior safety lights
- $\hfill\square$  interior emergency lighting and/or exit lighting
- □ baseboard heat (if applicable) working; air conditioning units working
- $\hfill\square$  smoke alarms in each bedroom, kitchen & hallways

#### Water & Waste

- $\hfill\square$  water tested and approved by local health department
- $\hfill\square$  hot water tank working
- $\hfill\square$  Septic/sewer in working condition
- $\hfill\square$  Instructions for sewer alarms: who to call, what to do.
- $\Box$  laundry facilities working

#### **Exterior/Interior**

- □ facility 911 address clearly posted
- □ property corners visibly marked (pegged, flagged, etc.)
- □ exterior safety light(s) working
- $\hfill\square$  trash receptacles available & clean
- $\hfill\square$  adequate off-street parking
- $\square$  docks safe, structurally sound, usable
- $\square$  egress windows in bedrooms
- $\hfill\square$  fire extinguishers visible and up to date
- $\hfill\square$  wood stove/fireplace/chimney in clean, working condition

## **Emergency Contact Information Posted (911)**

- □ Ambulance
- $\square$  Fire
- □ County Sheriff
- Code Enforcement Officer

# Local Contact Representative Name and Telephone Number Posted

### Permit Posted and Visible