



## Annual Rental Application Form

Revised: 7-30-24

Rental Type	Application Fee
Long-Term Rental	\$150/Building or First Unit + \$25/Additional Dwelling Unit
Short-Term Rental	\$500/Unit
Limited Short-Term Rental	\$0
Late Fee	50% of Application Fee

Rental Application and information are required **ANNUALLY** – based upon the certificate expiration month.

### I. Rental Property Information

Building Address (Multi-family use lowest address number): \_\_\_\_\_

Parcel No: \_\_\_\_\_ Number of Dwelling Units: \_\_\_\_\_

This is, for the address above, a(n):

Initial Registration Application

Annual Renewal Application

Check box if there are NO CHANGES from the previous year/**Application FORM.**

Duration of Rental (check one):

Short-Term Rental (STR)

- The rental or subletting of any dwelling for a term of less than 28 days.
- Shall be located within the Short-Term Rental Overlay Zone.

Limited Short-Term Rental (LSTR):  Yes, property has a principle residence exemption (aka PRE)

Rental period 1 start date \_\_\_\_\_ Rental period 1 end date \_\_\_\_\_

Rental period 2 start date \_\_\_\_\_ Rental period 2 end date \_\_\_\_\_

- The Rental or subletting of any Dwelling with a principle residence exemption, (aka PRE) for any one or two Rental periods of **at least six but not more than 14 days**, not to exceed 14 days total in a calendar year.

Long-Term Rental (LTR)

- The Rental or subletting of any Dwelling for a term of at least 28 days.

Dwelling Unit Category (check one):

Single Family

Duplex/Triplex/Quadplex

Multi-Family (Apartment)

### II. Owner Information

Name of Owner: \_\_\_\_\_

Name of Corp, Trust, LLC, etc.: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**You MUST attach a copy of your VALID driver's license if you live in one of the multi-family units.**

**PLEASE COMPLETE OTHER SIDE**

### III. Responsible Party Information (if Different from Owner)

Required to be available 24/7 to accept calls; must have key and capable of being physically present at the Dwelling within one hour.

Responsible Party/Local Agent's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Responsible Parties Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### IV. Required Submittal Information (REQUIRED: A-G for LSTR's/STR's; A-D for LTR's.):

The information below shall be provided/attached to the application.

Required for ALL RENTALS	<b>A. Insurance Information – Fire Coverage</b> <i>(Updated Proof Required Annually)</i> The Owner of a Rental Unit shall provide the Township proof of continuing fire insurance dwelling coverage of at least \$10,000 <i>(a copy of the insurance declaration page for the rental address).</i>
	<b>B. Bedroom Information</b> Bedroom #1 – Location: _____ Size _____ sqft Bedroom #2 – Location: _____ Size _____ sqft Bedroom #3 – Location: _____ Size _____ sqft Bedroom #4 – Location: _____ Size _____ sqft <i>Attach additional pages as needed. Multi-family apartment buildings, provide information per apartment dwelling.</i>
	<b>C. Parking Information:</b> On a separate page, provide a parking site plan showing the location and composition of surface material (i.e., gravel, asphalt, etc.) of proposed rental parking.
	<b>D. Mechanical Safety Inspection:</b> Approval documentation for a Mechanical Safety Inspection.
Not Required for LTR	<b>E. Insurance Information – Commercial Liability</b> <i>(Updated Proof Required Annually)</i> The Owner of a Rental Unit shall provide the Township proof of continuing commercial liability insurance coverage of at least \$1,000,000 <i>(a copy of the insurance declaration page for the rental address).</i>
	<b>F. Public Utilities:</b> Proof of public water and sewer service or approval by the Ottawa County Department of Public Health for use as or with a Short-Term Rental. <i>(Proof Required upon each Reinspection Date and upon Renewal if Potential Issues/Reasons Given by Health Department)</i>
	<b>G. Address of Homes within 300'</b> that you provided short-term rental information: _____ _____ _____ <i>Attach additional pages as needed.</i>

### Affidavit

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

1. All the information on the Annual Rental Registration Form and attached documents is accurate.
2. I agree that I will maintain the designated amount of commercial liability and dwelling fire insurance for the duration of the rental.
3. I understand that a LATE FEE will be assessed if all the application materials have not been received within 30 days of initial application.
4. The property owner and/or property manager has read and agrees to comply with the Grand Haven Charter Township Zoning Ordinance and Ordinance 605, Rental Guidelines and conform with the guidelines in the 2021 International Property Maintenance Code.
5. I understand Ordinance 605 requires periodic inspection of rental properties and payment of all fees.

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

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Annual Rental Application Fees Worksheet

Revised: 8-8-23

### Rental Property Information

Building Address (Multi-family use lowest address number): \_\_\_\_\_  
 Parcel No: \_\_\_\_\_ Number of Dwelling Units: \_\_\_\_\_

### Annual Application Fees

	Cost	Quantity	Total
Long-Term Rental (per building) Base Fee	\$150		
<ul style="list-style-type: none"> <li>• Additional Fee per Unit – Multi-Family (Duplex, Triplex, Quadplex, Apartment, etc.)</li> </ul>	\$25		
Short-Term Rental	\$500		
Limited Short-Term Rental	\$0		
Late Application Fee	50% of Application Fee		
<b>Total</b>			

### Grand Haven Charter Township Use Only

Document	Required	Approved	Date	By
Proof of Ownership	Yes No			
Parking Site Plan	Yes No			
Proof of Insurance	Yes No			
Mechanical Safety Inspection	Yes No			
Water Supply (Public/OCDPH Approved)	Yes No			
Septic or Sewer (Public/OCDPH Approved)	Yes No			
<i>Not required for Long-Term Rental</i>				

Inspection Fees	Cost	Quantity	Total
Initial Inspection	\$0		
First Re-Inspection	\$50		
Second Re-Inspection	\$100		
Third Re-Inspection	\$150		
Attorney Warning Letter	\$600		
Complaint Based Inspection	\$50		
Late Unpaid Inspection Fee	50% of Application Fee		
<b>Total</b>			

### Documentation of Dates

Date Application Filed: \_\_\_\_\_  
 Annual Fee Amount: \_\_\_\_\_ Date Paid: \_\_\_\_\_  
 Property Inspection Date: \_\_\_\_\_ Date Paid: \_\_\_\_\_  
 Approved By: \_\_\_\_\_ Date: \_\_\_\_\_