

TOWN OF WARWICK
SHORT TERM RENTAL RENEWAL APPLICATION

Application for renewal of the short-term rental permit is due 30 days prior to its expiration

\$100 Application fee (owner occupied dwelling)

\$750 Application fee (owner unoccupied dwelling)

Cash or Check (payable to Town of Warwick)

***PLEASE NOTE:**

Short term rental applications will be reviewed first, followed by a short-term rental inspection.

Handing in a completed application, under no means, deems your property approved for short term rental purposes.

Date: _____

Sec-Blk-Lot: _____ - _____ - _____

Property Owner Name: _____

Rental Property Address: _____

City: _____ State: _____ Zip: _____

Property Owner Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: (_____) _____ - _____ (A Phone Number That We Can Reach 24 Hours A Day).

Email Address: _____

Checklist of requirements (all must be submitted with application):

____ Number of bedrooms in rental unit: ____

____ Number of bathrooms in rental unit: Full ____ Half ____

____ Number of occupants in rental unit: ____ (maximum of 2 per legal bedroom)

____ Septic system pump out affidavit/receipt

____ Copy of homeowner's liability insurance no less than \$1,000,000.00 with rental

endorsement on policy (umbrella policy & Airbnb policy are not acceptable proof)

____ Provide list of all means of advertising which the rental property is/will be listed for rent

____ Indicate a full address where owner resides while rental is occupied

____ Current permit number displayed in all advertisements (provide screen shot)

____ Current expiration date of issued STR permit _____

Please fill out the following if the property owner does not reside within the corporate boundaries of Orange County, New York. (Rental agent must be located in Orange County)

Rental Agents Name: _____

Agent's address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ - _____

Email address (print clearly): _____

Rental Agents Signature: _____

AUTHORIZATION (NOTARY):

State of New York, County of _____, _____, being duly sworn deposes and says he/she is the owner and is duly authorized to make and file this application; that all statements are true and to the best of his/her knowledge and belief.

Sworn to before me

This ____ day of _____, 20____

Owner Signature: _____

NOTARY PUBLIC: _____

Print Name: _____

Stamp:



FOR TOWN USE ONLY

FEE PAID: _____

CHECK #: _____

CASH

AMOUNT OF CHECK: _____

Application #: _____