



**APPLICATION FOR SHORT TERM RENTAL LICENSE**

Property Owner: \_\_\_\_\_

Owner Type:

Owner Occupied  
Owner resides on Licensed  
Property

Resident Owner  
Owner resides in Shandaken,  
not on the Licensed Property

Absent Owner  
Owner resides outside  
Shandaken

Tax Map#/SBL: \_\_\_\_\_ Date of Purchase: \_\_\_\_\_ # of Bedrooms: \_\_\_\_\_

Property Location: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact Phone #'s: \_\_\_\_\_ / \_\_\_\_\_  
Day Time Night Time

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

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Property Manager: \_\_\_\_\_

Local Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact Phone #'s: \_\_\_\_\_ / \_\_\_\_\_  
Day Time Night Time

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

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**Along with the completed application the following must be provided**

- A copy of the Property Map including boundaries posted in the STR
- Floor Plan drawn to scale with rooms and dimensions
- Ulster County Certificate of Authority
- A copy of Property and STR/Landlord Insurance
- A copy of the Emergency Contact Document posted in the STR
- A copy of the deed for the property
- Non-refundable application fee (\$150)
- Owner Occupied and Resident Owner Applicants – Proof of Residency (Drivers License, Utility Bill, Tax Bill, Vehicle Registration etc.) 3 documents will be required

A non-refundable application fee of \$150.00 is due upon receipt of application. We accept cash or checks made out to Town Clerk. **Visa, Mastercard and Discover** credit card payments are also accepted.

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_ Billing Zip: \_\_\_\_\_

Card Number: \_\_\_\_\_ CVV: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**A 2.6% Bank Fee will be added to all Credit Card payments.**

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An initial provisional License will be issued upon receipt of complete application, application fee and Annual License fee. A fully approved License will be issued following review by the Zoning Enforcement Officer, and inspection of the Licensed property by the Code Enforcement Officer or a Code Certified professional retained by the applicant.

Upon receipt of a Short Term Rental License, the license number must be made a part of the heading on each platform (Airbnb, Vrbo etc)

Any change in the name of person(s) holding interest in the STR or their contact information shall be provided to the Town within ten (10) days of such change. All persons holding an ownership interest in an entity shall be responsible to comply with the provisions of this local law and the Good Neighbor Flyer and each shall be liable for any violation thereof.

I/we, \_\_\_\_\_, the above-named applicant(s), hereby attest that I/we have read the Town of Shandaken STR Law and that the information provided on this application is true to the best of my/our knowledge and belief and that the STR is safe and habitable and, to my/our knowledge, complies with the State Building Code, Fire Prevention Code and Uniform Code.

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

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

**This statement does not supersede the Code Enforcement Officer's authority to inspect STR's and enforce applicable laws, rules and regulations. False statements made on this application are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.**

**Acknowledgment of Individual**

State of New York \_\_\_\_\_ County of Ulster  
On the \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ before me, the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is(are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
Notary Public

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**Office Use Only**

Date Recd: \_\_\_\_\_ Recd By: \_\_\_\_\_ Application Fee Recd: [ ] Yes [ ] No

Application Complete: [ ] Yes [ ] No Documentation Needed: \_\_\_\_\_  
\_\_\_\_\_

Date Recd: \_\_\_\_\_

Owner Type: [ ] Owner Occupied [ ] Resident Owner [ ] Absent Owner

Annual License Fee: \_\_\_\_\_ Annual License Fee Recd: \_\_\_\_\_

Provisional License Issued: \_\_\_\_\_ License #: \_\_\_\_\_

Fully Approved License Issued: \_\_\_\_\_ License Expires: \_\_\_\_\_