

**SHORT-TERM PROPERTY RENTAL
ANNUAL APPLICATION and PERMIT**

GOLDEN TOWNSHIP

APPLICATION DATE _____

5527 W. FOX RD. / P.O. BOX 26

MEARS, MI. 49436 (231-873-4413)

In accordance with Ordinance 51, this form must be submitted with a copy of the **TENANT'S PROPERTY RULES; SITE PLAN** - showing lay out of property and lay out of dwelling with room sizes & all sleeping facilities (beds ect.); **Certificate of SEPTIC SYSTEM INSPECTION** (within last 5 years & based on number of sleeping facilities); **PROOF OF INSURANCE** (coded as Rental); and **application fee of \$150.00**

PROPERTY OWNER(S) OR AGENT(S) INFORMATION

PROPERTY # 64-006-_____, ADDRESS OF RENTAL _____

NAME ; _____, PHONE # _____

MAILING ADDRESS : _____

_____, E-MAIL : _____

MAXIMUM NUMBER OF OCCUPANTS : _____, NUMBER OF SLEEPING FACILITIES (beds, ect.) _____

NUMBER OF PARKING SPACES : _____, REMARKS : _____

SIGNATURE OF PROPERTY OWNER _____

(I CERTIFY THE ABOVE and ATTACHED INFORMATION IS TRUE and CORRECT and THAT THE PROPERTY IS IN COMPLIANCE WITH STATE OF MICHIGAN and OCEANA COUNTY BUILDING CODES).

SIGNATURE OF AGENT _____

(I CERTIFY THE ABOVE and ATTACHED INFORMATION IS TRUE and CORRECT and THAT THE PROPERTY IS IN COMPLIANCE WITH STATE OF MICHIGAN and OCEANA COUNTY BUILDING CODES).

APPROVAL OF THIS PERMIT DOES NOT RELIEVE THE APPLICANT OF ANY OTHER NECESSARY PERMITS

GOLDEN TOWNSHIP OFFICE USE ONLY

REGISTRATION # _____ / PERMIT WILL EXPIRE ON _____

ZONING ADMINISTRATOR APPROVAL _____ DATE: _____

PLANNING COMMISSION DECISION _____ DATE: _____