

VILLAGE OF GREENWOOD LAKE, INC.
BUILDING DEPARTMENT

18 CHURCH ST P.O BOX # 59
GREENWOOD LAKE NY 10925

SHORT TERM RENTAL REGISTRATION FORM

Name of owner for rental property: _____

Social Security number: _____ - _____ - _____ Email Address: _____

Telephone Number: (_____) _____ - _____ Cell Phone Number: (_____) _____

Mailing Address of property owner: _____

City: _____ State: _____ Zip Code: _____

Physical Address of property owner: _____

City: _____ State: _____ Zip Code: _____

Rental Property Address: _____

City: _____ State: _____ Zip Code: _____

S.B.L. _____

Number of rental units per building: _____

Number of bedrooms in rental unit: _____

Number of bathrooms in rental unit: _____

Number of overnight & daytime occupancy limit: _____

Number of exit locations: _____

Fire safety protection system type: _____

Please fill out the following if the property owner does not reside within the corporate boundaries of Orange County, New York.

Rental Agent use only:

Rental Agency's Name: _____

Rental Agents Name: _____ Agents Address: _____

_____ City _____ State: _____ Zip Code: _____

Agents Phone Number: (____) _____

Rental Agents Signature: _____

Application Fee Paid: Yes No

Authorization:

State of _____, County of _____, Name of, _____ being duly sworn deposes and says that the work will be performed in the manner set forth in this application and in the specifications filed therewith he/ she is the owner or rental agent and is duly authorized to make and file this application: that all statements are true to the best of his/ her knowledge and belief.

Sworn to before me:

This _____ day of _____

Notary Public: _____

Owner/Agent Signature: _____

Print Name: _____

***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 a short-term rental.

Application Approved: Yes No

Reason(s) for Disapproval: _____

