

Short Term Rental (STR) Registration Application

Physical Address: 4710 Pointe Tremble, Clay Township, Michigan 48001 Phone: 810-794-9303

Mailing Address: PO Box 429, Algonac, Michigan 48001 Fax: 810-794-1964

www.claytwpmi.gov

Application Number:	Date Received:
Parcel #:	

Steps in the Registration Process:

- 1. Complete this Registration Application
- 2. Submit this application with the registration fee of \$200 to the Clay Township Bldg Clerk (Certification is valid for two years)
- 3. The Building Department will make contact to schedule an inspection

I have read and understand the Township of Clay Short Term Rental Ordinance.

Property Owner/Agent Name (Print):
Property Owner/Agent Signature:

- 4. The Building Department will remit payment to Treasurer when the property meets the inspection guidelines
- Upon notification from the Building Department, the Township will send the owner/agent a Rental Certificate
 Note: STR Registration Form and all information is required to be submitted Bi-Annually, any changes to this information should be provided at time of occurrence.

Rental Property Address:		
New Rental:	Renewal:	
Property Owner Na	ame:	
Mailing Address/PO Box:		
City:	State:	Zip:
Email:		Cell Phone:
I hereby certify that the agent as listed below is authorized to make this application for short term rental as my agent and we agree to conform to all applicable laws and regulations of the Township of Clay. I additionally grant Township of Clay staff or authorized representatives thereof access to the property to conduct inspections persuant to this application upon request, within a reasonable time frame.		
Owner Signature:		Date:
Local/Agent Contact Information (if applicable)		
	ct information (if a	• • • •
Agent Name:		Agent Phone:
Agent Mailing Addr	ess:	Agent Email:
Preferred Contact and Other Rental Information:		
Who should the township contact to schedule Building Department inspection? Owner / Agent Who is the primary contact for questions from the Township? Owner / Agent		
Number of ADVERTISED		vertised Max Occupancy: Number of Occupied Floors:
Average Length of Renta	l Stays (in days):	Advertised number of off-street parking spaces:
Rental is advertised for t Jan Feb March Ap		ircle all that apply): Aug Sept Oct Nov Dec
nsurance Company Name: Policy Number:		
Expiration/Policy Renewal Date: Send Certificate to: Owner / Agent / Pick-up from office		
LOCAL EMERGENCY CONTACT NAME & PHONE NUMBER:		

Date Signed:

Affidavit

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

- 1. Each dwelling unit will have an operating smoke detector in each bedroom and an operating carbon monoxide detector on each floor. These units will be maintained regularly for renters safety.
- 2. I have liability coverage for the property (declaration page attached)
- I have provided a copy of the rental agreement used to lease the dwelling with this registration form.
- 4. I consent to inspections of the rental unit by the township and will make the unit available for inspections upon request, within a reasonable time frame.
- 5. I will provide renters with a copy of the Township "Good Visitor Guide" and the Short-Term Rental Ordinance.
- 6. I/we are in compliance with Michigan Compiled Laws MCL 211.7cc & 211.7dd regarding Principle Residence Exemption, if being claimed, or have filed a Request to Rescind Principle Residence Exemption.
- 7. This registration form is accurate and complete.

Owner/Agent Signature:

Date:

By signing above, 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.

Submit completed Application & Affidavit with \$200 registration fee, a copy of liability insurance declaration page and rental lease agreement to the address below:

Clay Township Attn: Building Clerk PO Box 429

Algonac, Michigan 48001

NOTICE: The issuance of a certificate of registration shall in no way impact the zoning of the subject property and shall not prevent the township from enforcing Zoning Ordinance regulations and limitations on said property, or any other applicable code of the township.

The certificate will be issued and available for pick up or mailing from the Clay Township Building Department upon completion and approval of the unit inspection and processing of payment by the Township Treasurer.