

Short-Term Rental Permit Application

455 County Center, 2nd Floor | Mail Drop PLN 122 Redwood City, CA 94063 (650) 363-4161 planning.smcgov.org

Applicant

	New
	Renewal
	Original Permit No:
Applicant	Owner
Name:	Name:
Address:	Address:
Phone:	Phone:
Email:	Email:
LocalContactPerson	ProjectInformation
Name:	Site Address:
Address:	
Diagram	Assessor's Parcel Number:
Phone:Email:	Zoning: No. of Bedrooms for short-term rental:
RequiredMaterials	
□ Proof of ownership (copy of deed or tax bill)	
$\hfill\Box$ Owner's concurrence (if application is submitted by	γ a different party)
□ Copy of Transient Occupancy Tax Certificate	
□ Proof of liability insurance (minimum \$500,000)	
□ Copy of lease agreement	
☐ Site plan (or aerial photo) showing required off-stre	eet parking space(s)
□ Floor Plan of residence that clearly distinguishes are bedroom, bathroom, living room, etc.)	as to be used for short-term rental, all areas should be labeled (i.e.,
□ Proof house address is visible from the street (pictu	ure)
□ Proof smoke + carbon monoxide alarms and fire ext	tinguisher are installed (picture)
•	\$431.00 ard)\$12.93
Signatures We hereby certify that the information stated above a support of the application is true and correct to the be	nd on forms, plans, and other materials submitted here within est of our knowledge.

Owner

Date

Date