



# Short Term Rental Certificate of Compliance Application

<b>CITY USE ONLY</b>		Permit #: _____
Plan Review#:	Review Fee:\$ _____	Ref. Permit #: _____
		Permit Fee:\$ _____

This application is made in accordance with the laws and ordinances of the City of Lilburn. The Certificate of Compliance issued is granted for according to the plans or specifications submitted and is to be located on the property as shown on the accompanying plan.

<b>PROPERTY INFORMATION</b>				
Street Address/Suite				
Subdivision:				
District 6	Land Lot	Parcel	Zoning	<input type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Septic Tank
Details of Short Term Rental Business/Property:			<input type="checkbox"/> Entire Home <input type="checkbox"/> Individual Rooms # _____	
			<input type="checkbox"/> HOA, if so does HOA convene approve of Short Term Rentals? YES or NO	
Total Number of Occupants: _____		Number of Unrelated Occupants not to Exceed 4 Persons* Subject to City Regulations		
Number of: (CIRCLE WHERE APPLICABLE)		Bedrooms According to Tax Records:      2    3    4    5		
Total Paved Parking Spaces:		Setback from Property Lines:		
		Front	Rear	Left Side      Right Side
Total Square Footage:				
**Attach Aerial Image/Site Plan**		All waste to be disposed of through Waste Management <a href="http://www.wm.com">www.wm.com</a>		
<b>PROPERTY OWNER</b>		<b>LOCAL AGENT/24-HOUR CONTACT</b>		
Street, Suite		Business Name		
		Street, Suite		
City, State, Zip		City, State, Zip		
Owner Name (print):		Local Agent Name (print):		
Owner Name (signature):		Local Agent Name (signature):		
Phone:		24HR Phone:		
Email:		Email:		

By signing this application I agree to abide by Zoning Conditions, Covenants & Licensing Requirements that may apply to this property.

Property Owner     Local Agent

Applicant's Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_