

City of Lighthouse Point

Transient Rental Certificate Application

Initial (I)	_ Renewal (R)		Modification (M)
\$750	\$	500	Modification (M)
individually or collectively ov Dwelling unit that is rented to	wned single-family, to Transient Occupants	wo-famil for perio	n a condominium or cooperative or any y, three-family, or four-family house or ods of six (6) months or less, or which is ent Occupants, including, but not limited to
unit prior to renting any dwe	elling unit as a Trar A transfer of ownersh	nsient Re nip of a Ti	ertificate of Compliance for each dwelling ental. A Transient Rental Certificate of ransient Rental shall require the new owner tental.
Certificates of Compliance are 30 of each year regardless of wh		n one (1)	year, and all Certificates expire September
Date of Submittal/_ Month	Day Year		
Applicant/Property Owner:			
Property Owner Name (Name/F	Entity)		
Mailing Address (Street, City, S	•		
Daytime Phone /	Cell Phone	_/	Email Address
Transient Rental Responsible			
Name of Responsible Party (ava	ailable 24 hours a day,	7 days a	week):
Local Address (Street, City, Sta	te, and Zip Code)		
Contact Phone Number * /		/	
Contact Phone Number * /	Alternate Phone	/	Email Address

• Main Contact Phone Number must be answered twenty four (24 hours a day, seven (7) days a week.

Acceptance of Responsible Party (signature):					
Legal Descrip	otion of Property	7:			
	, ,		/		
Block	Lot	Subdivision	Parcel ID		
Street Address	(Street, City, Sta	nte, and Zip Code)			
	Ackn	owledgment of Owner to terms of (Please initial each item)	Compliance		
		sociated with the Transient Rental mathematics and no more than one (tted;	-		
limitations of S		Occupant of any Transient Rental (a) of Ordinance 2015-0926.	shall comply with the noise		
 and Federal la		the property shall comply with all a ions, ordinances and statutes.	applicable City, County, State		
	titled owner of th	perty that is the subject of this applied property that is the subject of this Annances of the City of Lighthouse Poi	Application, are in violation of		
the subject of	application, or a	unsatisfied City liens recorded againy other property owned by the titled, as a result of any violation of house Point.	d owner of the property that is		
	all be located at the	e or recycling container for the prophe curb for pickup before 6:00 p.m. ontainers shall be removed before 9:0	of the day prior to pick up, and		
licensed, or in	y structure or convited, is warned	nout being authorized, licensed, or nveyance on a Residential Property by the owner or Transient Occupant ffense of trespass in a structure or con-	r, or, having been authorized, nt, to depart the property and		
available for u		es are not jointly shared commodities Occupants of the Transient Rental sub			
	upancy is not p	ting occupancy by a Transient Occurohibited by the City's sexual offers 54-9 through 54-12 of the City's C	ender and predator residency		

All the follo	owing must be submit	tted to have a complete applicati	ion submittal:				
C	'omnlete Transient R	ental Application (I, R, M)					
			f Lighthouse Point) (I. R. M)				
	Correct Fee (check or money order payable to the City of Lighthouse Point) (I, R, M) Proof of Ownership (i.e.: Recorded Deed or BCPA page) (I, R, M)						
	Proof of Registration with the Florida Department of Revenue for Sales Tax, or proof						
	_	ction is required for the use (I, F	• -				
			ion with the Broward County for				
t	he Tourist Developm	ent Tax (I, R, M)	•				
F	Business and Professi	onal Regulation for Transit Pub	e with the Florida Department of lic Lodging Establishment (I, R, M)				
		sient Rental Agreement (I)					
	Exterior Sketch (Drawn to scale: all structures, pools, fencing, off street parking spaces, trast						
	ontainers) (I,M)		anima na ana (assanhana d) assita				
		n to scale: floor plan, bedrooms/sl					
		e detectors, and fire extinguishers) pection Certificate (I, R, M)) (1, IVI)				
		xide Detector Inspection Certific	note (I. D. M)				
8	moke/Carbon Monda	due Detector Inspection Certific	ate (1, K , W1)				
Are you re Disabilities		able Accommodation be grante	ed based on Federally Recognized				
	Y	'es No					
		CEDTIFICATION					
		CERTIFICATION					
I have revie therein shal		2015-0926 and certify that all pr	ovisions and regulations set forth				
		nation contained in this applic rue, complete, and accurate.	ation, and that to the best of my				
		oint the right to inspect the pren cate of Compliance and for the i	nises of the Transit Rental prior to required annual inspections.				
Printed Nam	ne	Signature	Date				
STATE OF							
COLINTY							
COUNTY)F						
SWORN TO	O (or affirmed) and sub	oscribed before me this day of	of20,				
by	·	, who is known to	me or has presented identification,				
and who did	l take an oath.		_				
		Signature of	Notary Public				
[SEAL]							