

MIDDLE SMITHFIELD TOWNSHIP 147 MUNICIPAL DRIVE EAST STROUDSBURG, PA 18302 570-223-8920 FAX: 570-445-3720

SHORT TERM RENTAL APPLICATION

ALL SECTIONS OF THIS APPLICATION MUST BE COMPLETED

Ι.	Property Address:		
2.	Property Identification Number (PIN): 0 9 7 3		
3.	Property Owner's Name(s):		
	Mailing Address:		
	24 hour Phone Number:		
	Can this phone number receive text messages?		
	Email:		
4.	Managing Agent's Name:		
	*A managing agent is required if the Property Owner is not a local resident Mailing Address:		
	24 hour Phone Number:		
	Can this phone number receive text messages?		
	Email:		
5.	Type of Dwelling used for Short Term Rentals: ☐ Single-Family ☐ Townhome/Condo ☐ Multi-Family ☐ Individual Rooms ☐ Other:		
	If building is a multi-unit structure, total # of units being used as Short Term Rentals:		
	If building is a multi-unit structure, a separate application is required for each unit used as a short term rental		
6.	Total number of bedrooms: Total number of bathrooms:		
7.	Sewage System: ☐ Private Septic ☐ Public/Community Sewer		
	If septic, date of last inspection/pump:		
	*Must provide township with copy of professional evaluation of septic system		
	Approximate age of system: Capacity of System		
	Approximate age of system eapacity of system		
8.	Is property within a gated community? If yes, provide access code:		
9.	Is property within a developed community under the jurisdiction of an HOA/POA?		
	If so, name HOA:		

Application must be submitted with the following:

- 1. Copy of the current Deed
- 2. If Private Septic, the location, approximate age and capacity of the sewage disposal system, a professional evaluation of the septic system & proof of pumping within the last 12 months.
- 3. Copy of current Monroe County Hotel Room Excise Tax Certificate
- 4. Copy of current Pennsylvania Sales & Use Tax Permit
- **5.** Trespass waiver signed by the owner of the property.
- **6.** Application fee.

I hereby certify that I am the owner of the above referenced property. If the property is owned by a corporation, I certify that I am a partner of that corporation and have the authority to sign and acknowledge the following on behalf of the corporation.			
I have read, understand and agree to the provisions set forth in Chapter 150, §150-7 of the Middle Smithfield Township Code for Short-Term Rental Standards. I have also read and understand Chapter 150, § 150-13 regarding violations and penalties and that any violation of the provisions of Chapter 150 may result in fines and/or the revocation of a Short-Term Rental Permit. I agree to conform to all applicable laws of this jurisdiction. I understand that the issuance of a Short Term Rental Permit is not guaranteed by this application.			
Signature of Property Owner:	Date:		
I hereby certify that I am the Managing Agent of the above referenced property and have been given authority to accept service for the Property Owner. I have read, understand and agree to the provisions set forth in Chapter 150, §150-7 of the Middle Smithfield			
Township Code for Short-Term Rental Standards. I agree to conform to all applicable laws of this jurisdiction. I understand that the issuance of a Short Term Rental Permit is not guaranteed by this application.			
Signature of Managing Agent:	Date:		



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TRESPASS WAIVER

Signature of Property Owner/Authorized Partner: