

Check one: New Application (\$100.00) _____

Annual Renewal (\$50.00) _____



**SHORT TERM RENTAL PROPERTY (STRP) PERMIT APPLICATION
CITY OF COOKEVILLE
CODES DEPARTMENT**

Short Term Rental Property Address _____

Property Owner Name _____ Phone _____

Address (if different from STRP) _____

Email Address _____

If person or entity other than the Property Owner is responsible for maintenance of the STRP please provide information below:

STRP Attendant Name _____ Phone _____

Address _____

Email Address _____

The area below is for internal use only. Please bring the application and supporting documents to the Department of Codes at Cookeville City Hall, 45 East Broad Street, Cookeville, TN 38501

Please include the following with the application:

Fire Inspection: Date (Must be Current Year): _____

City of Cookeville Business License: Issued Date (Must be Current): _____

Expiration Date: _____

Proof of Liability Insurance Compliance: Policy Issued Date: _____

Policy Expiration Date: _____

Amount (Minimum of \$1,000,000): _____

Certification:

I, the undersigned, hereby certify that I have read and understand the standards for Short Term Rental Properties, Section 206.26 of the Cookeville Zoning Code and acknowledge that it is my responsibility to assure that the Short Term Rental Property approved by this permit is in operation under compliance with the requirements of the Cookeville Zoning Code.

APPLICANT SIGNATURE _____ APPLICATION DATE _____

BUILDING OFFICIAL _____ ISSUE DATE _____

APPROVED _____ DATE _____

DATE FILED _____ FEE PAID ___ yes ___ no DATE _____