

Clifton Township
Short Term Rental Permit

Office

Date Received Permit Application: _____

Date of Home Inspection : _____

Enforcement Officer's Name : _____

Any Areas of Non Compliance : _____

Permit Approval : Yes _____

No _____

Pending _____

Date: _____

Documents Included :(X= included)

_____Floor Plan _____Number of Bedrooms

_____Site Plan _____ Number of Parking Spaces

_____Septic System Evaluation and Pumping Record

_____Copy of Required Tax Certificates

_____Copy of Property Deed

_____Insurance Policy Declaration Page

I/We hereby give consent for inspection of the property by the Clifton Township Enforcement Officer to verify compliance with the conditions of this Short Term Rental Application. Owner authorizes management company to accept service for the owner.

Owner's signature

Date

Managing Agent/Local Contact
signature

Date