Official Office Use
Application Date: __________
Date Issued: ______________
____
Official Signature

Permit No. __________

Sherman Township
Short Term Rental Renewal Permit Application

Renewal Year ____________

Property Information

Street Address: ____

Property Owner: ____

Property Tax ID #: ____

Since the previous year, are there any changes in the Property Owner, deed restrictions, Authorized Agent, or 24-Hour Contact Person?

☐ No – Sign below and submit with renewal fee.

☐ Yes – Please note new information on a Short Term Rental Application and submit with renewal fee.

I acknowledge that have read the Sherman Township Short Term Rental Ordinance and the information on this application. I also acknowledge and state that this information is accurate to the best of my knowledge and that I have the legal authority to apply for this permit. If any information that I have provided as actual and truthful is indeed false and untrue I understand that this permit may be revoked, and that I may not reapply for a Short Term Rental Permit for a one-year period.

____________________________________ ____________________________________

Print name of Owner/Agent **Signature of Owner/Agent**

Date: ________________

Sherman Township
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Fremont, MI 49412

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shermanzoning@hotmail.com