

3.7 Short-Term Rental Application Form

PROPERTY INFORMATION

Street Address: _____

City/Town: _____ State: _____ Zip Code: _____

PROPERTY OWNER(S) *Person(s) or Entities who own record title to the Property.*

Name: _____ Email: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip Code: _____

Phone #: _____ Alt. Phone #: _____

Vehicle Make/Model/Year: _____ License Plate No.: _____

HOST (IF DIFFERENT THAN PROPERTY OWNER) *The host is a person who contracts or advertises the Property for operation as a Short-Term Rental.*

Name: _____ Email: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip Code: _____

Phone #: _____ Alt. Phone #: _____

Vehicle Make/Model/Year: _____ License Plate No.: _____

DESIGNATED RESPONSIBLE PARTY (IF DIFFERENT THAN PROPERTY OWNER) *The Designated Responsible Party is a person in the local area who is available to immediately respond to any issues arising from the Short-Term Rental. This person must be available for contact 24/7.*

Name: _____ Email: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip Code: _____

Business Address: _____

City/Town: _____ State: _____ Zip Code: _____

Phone #: _____ Alt. Phone #: _____

Vehicle Make/Model/Year: _____ License Plate No.: _____

RESIDENT(S) (OVER THE AGE OF 18) (IF DIFFERENT THAN PROPERTY OWNER) *Any person other than the Owner who domicile at the Property.*

Name: _____ Email: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip Code: _____

Phone #: _____ Alt. Phone #: _____

Vehicle Make/Model/Year: _____ License Plate No.: _____

(Additional Vehicle Information May Be Provided on Separate Form)

THE WOODLANDS TOWNSHIP * THE WOODLANDS, TEXAS 77381
2801 Technology Forest Blvd. * 281-210-3973 * Web site: www.thewoodlandstowship-tx.gov

OPERATIONAL INFORMATION

1. In your garage, how many spaces are available at all times for parking vehicles? _____
2. How many vehicles can be parked on your driveway at one time? _____
3. Are you able to park all Owner and Short-Term renter(s) vehicles on the property? _____
4. Do you intend to have off-property designated parking? _____
5. What is the advertised total occupancy limit for the home on the property (if any)? _____
6. What is the advertised shortest stay for a renter (number of nights) at the property? _____
7. What is the advertised longest stay for a renter (number of nights) at the property? _____
8. What is the anticipated average number of nights per year you intend to rent the portion of the property made available for short-term rental? _____
9. How will the property be advertised for rental (please list all web-sites, real estate professionals and/or third-party listing sites and contact information for each service provider, and provide copied of all photos to be used in such advertising; list each URL/Property number on each listing if already established)?

10. Please provide any further details in support of the answers to Questions 1-9 or which would be helpful in reviewing and acting upon this application.

SERVICE PROVIDER

Service Provider Type (check one):

___ Third-Party Listing Site ___ Real Estate Professional ___ Maintenance Company

Business Name: _____ Web-site: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip Code: _____

Phone #: _____ Alt. Phone #: _____

Primary Contact: _____ Email: _____

SERVICE PROVIDER

Service Provider Type (check one):

___ Third-Party Listing Site ___ Real Estate Professional ___ Maintenance Company

Business Name: _____ Web-site: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip Code: _____

Phone #: _____ Alt. Phone #: _____

Primary Contact: _____ Email: _____

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2801 Technology Forest Blvd. * 281-210-3973 * Web site: www.thewoodlandstowship-tx.gov

(Additional Service Provider(s) Beyond Those Listed May be Provided on Separate Form)

ADDITIONAL SERVICE PROVIDER(S)

SERVICE PROVIDER

Service Provider Type (check one):

Third-Party Listing Site Real Estate Professional Maintenance Company

Business Name: _____ Web-site: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip Code: _____

Phone #: _____ Alt. Phone #: _____

Primary Contact: _____ Email: _____

SERVICE PROVIDER

Service Provider Type (check one):

Third-Party Listing Site Real Estate Professional Maintenance Company

Business Name: _____ Web-site: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip Code: _____

Phone #: _____ Alt. Phone #: _____

Primary Contact: _____ Email: _____

SERVICE PROVIDER

Service Provider Type (check one):

Third-Party Listing Site Real Estate Professional Maintenance Company

Business Name: _____ Web-site: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip Code: _____

Phone #: _____ Alt. Phone #: _____

Primary Contact: _____ Email: _____

VEHICLE(S) ASSOCIATED WITH ACTIVITY ON THE PROPERTY

VEHICLE

Owner(s) Name: _____ State of Plate: _____
Vehicle Make/Model/Year: _____ License Plate No.: _____

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OWNER CERTIFICATION, HOLD HARMLESS, WAIVER AND RELEASE OF LIABILITY

- 1. The information set out above and included with this Application is accurate and complete.
- 2. The Short-Term Rental will be operated in accordance with the approved application, including any specific conditions of approval established by the Development Standards Committee (DSC) and/or The Woodlands Township.
- 3. All Property Owners, Hosts, Designated Responsible Party, and Resident(s) (if any) have read The Woodlands Residential Development Standards and the applicable Covenants, Restriction, Easements, Charges and Liens of The Woodlands.
- 4. The Property is not in violation of any part of either The Woodlands Residential Development Standards or the applicable Covenants, Restriction, Easements, Charges and Liens of The Woodlands. Further, The Woodlands Township is allowed to reasonably inspect the Property prior to and after any approval requested herein, as deemed necessary by The Woodlands Township and/or the DSC.

Owner, Host, Designated Third Party and Resident(s) (if any) understand that The Woodlands Township does not review the Property for intended use for compliance with applicable laws or codes, and that it is the duty of the Owner, Host, Designated Third Party or Resident(s) (if any) to operate, maintain and use the Property/Short-Term Rental according to applicable laws, codes and sound practices. Owner hereby releases and agrees to defend and hold harmless The Woodlands Township, the DSC and their respective members, directors, representatives, agents and employees harmless from any claims, demands, costs, obligations or liabilities in any manner associated with the approval of the application and/or permitting for operation a Short-Term Rental.

In consideration of being able to operate a Short-Term Rental at the Property, Owner, Host, Designated Third Party and Resident(s) (if any) hereby release, waive, discharge, covenant not to sue and agree to hold The Woodlands Township and its agents and employees harmless from any cost or liability arising out of the review or approval of permitting the Short-Term Rental and/or uses of the subject Property and to indemnify the releases and each of them from any loss, liability, damage, claim or demand, to or from property or person, or cost on account of the proposed operation and/or use. Property, Owner, Host, Designated Third Party and Resident(s) (if any) hereby further release, waive, discharge, covenant not to sue and agree to hold The Development Standards Committee, its members, and its agents harmless from any cost or liability arising out of the review or approval of permitting the Short-Term Rental and/or uses of the subject Property and to indemnify the releases and each of them from any loss, liability, damage, claim or demand, to or from property or person, or cost on account of the proposed operation and/or use.

_____	_____
Applicant/Host Signature	Date
_____	_____
Owner Signature	Date
_____	_____
Designated Responsible Party Signature	Date
_____	_____
Resident Signature	Date

(For Office Use Only)

Effective Date: _____ Staff: _____

Int. _____

CONDITIONS OF APPROVAL:

SUPPLEMENTAL ACTIONS AND CONDITIONS

Effective Date: _____
