



SHORT-TERM RENTAL APPLICATION

CITY OF CUMBERLAND

SHORT-TERM RENTAL The use of a property for the purpose of providing or furnishing overnight lodging accommodations to the public for a period of less than 30 days for total of more than 10 nights per year to any person(s) who occupies the property on a rental basis.

OWNER INFORMATION

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____

EMAIL: _____

SHORT-TERM RENTAL INFORMATION

ADDRESS: _____

OWNER INITIAL	ACTION	ITEM	STAFF INITIAL
	PROVIDE	COUNTY TOURIST ROOMING HOUSE OR BED & BREAKFAST LICENSE EXP: _____	
	PROVIDE	STATE OF WISCONSIN SELLER'S PERMIT EXP: _____	
	PROVIDE	SITE PLAN	
	PROVIDE	CERTIFICATE OF HOMEOWNER'S OR BUSINESS LIABILITY INSURANCE	
	PROVIDE & ACKNOWLEDGE	OPERATIONAL RULES POSTED	
	ACKNOWLEDGE	OPERATIONAL RULES PROVIDED TO ADJOINING PROPERTY OWNERS	
	CITY CALCULATE	OCCUPANCY LIMIT _____	
	ACKNOWLEDGE	GUEST REGISTER	
	ACKNOWLEDGE	INFORMATION DISPLAYED ON ENTRANCE DOOR	
	ACKNOWLEDGE	PROPERTY ADDRESS DISPLAYED	
	ACKNOWLEDGE	SIGNAGE	
	PROVIDE	# OFF STREET PARKING SPACES _____	
	ACKNOWLEDGE	GARBAGE AND RECYCLING COLLECTION	

LOCAL CONTACT

(MUST BE ABLE TO RESPOND WITHIN 30 MINUTES)

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____

EMAIL: _____

The owner signature hereby authorizes the above agent to schedule inspections and to be present during all inspections.

OWNER SIGNATURE: _____ **DATE:** _____

SHORT-TERM RENTAL APPLICATION FILED DATE: _____

SHORT-TERM RENTAL LICENSE FEE \$100.00 DATE PAID: _____