CITY OF GOOSE CREEK, SC



SHORT-TERM RENTAL UNIT PERMIT APPLICATION

To be processed, this Short-term Rental Unit Permit application must be competed in full, with all required supplemental information completed and attached with the submission. A Short-term Rental Unit Permit must be approved and issued prior to advertising, leasing, or operating any dwelling unit as a Short-term Rental Unit. Failure to comply with all requirements as described in the City of Goose Creek Code of Ordinances, will cause an application to be denied if it has been submitted but not approved; further, it will also prevent any future applications for the same property from being reviewed by the City of Goose Creek for a year from the date of the initial denial.

TYPE OF APPLICATION

Initial 🗆	Renewal 🗆	Modification \Box

Initial Registration (non-refundable)	
Annual Renewal of Registration (non-refundable)	
Registration Permit Modification (new rental agent, more bedrooms, reduced parking)	\$0

PROPERTY INFORMATION

Physical Street Address		
Property Identification Number (TMS)		
Type of Dwelling Unit* *Single-family, Multi-family	# of Bedrooms	
Is your rental a <u>whole home rental</u> or a <u>home sta</u> **Home stay rental is defined as an owner-occupied rental		e)?
# of Bedrooms Rented (home-stay only)	_ # of days per caler	ndar year property will be rented
Minimum # of days property will be rented to the	ne same individual or	party:
PROPERTY OWNER INFO	RMATION	
Property Owner Name* Business Name		ess Name
Mailing Address (Street)		
City	State	Zip Code
Phone Number (Primary)	Phone Number (Secondary)	
E-Mail		
Online Listing Website Address		

* If owner(s) is/are not a natural person, identify all partners, officers and/or directors of any such entity, including personal contact information. Attach separate sheet, if necessary.

LICENSED RENTAL AGENT INFORMATION

Agent Name	Business Na	Business Name	
Mailing Address (Street)			_
City	State	Zip Code	_
Phone Number (Primary)	Phone Number	Phone Number (Secondary)	
E-Mail			_
REQUIRED DOCUMENTATION		APPLICANT INITIA	ALS
Short-term Rental Unit Permit Application with Fee			
Property Owner Responsibilities Acknowledgement			
Short-term Rental Unit Checklist			
Short-term Rental Agent Authorizatio	n Form (if applicable)		
Copy of "Guest Information" Docume	nt		
Approval from HOA, POA or Condomi	nium Association, if applica	ble, on Letterhead	
Complete Home Occupation License A	Application For (Home-Stay	Rental only)	

I affirm that I will adhere to the provisions and regulations outlined in the City of Goose Creek Code of Ordinances and Short-Term Rental Unit Ordinance. I have thoroughly reviewed the information provided in this application and confirm that, to the best of my knowledge, it is accurate, complete, and truthful.

All owners and authorized licensed rental agents, if applicable, must sign this application. Licensed rental agents acting on behalf of property owners are required to complete the Property Owner Authorization Form and sign the Property Owner Responsibilities and Acknowledgements Affidavit.

By signing this document, I acknowledge	that I have read and understand	the responsibilities associated with
operating a Short-term Rental Unit on this _	day of	, 20

Property Owner Signature

Licensed Agent Signature

Printed Name of Property Owner

Printed Name of Licensed Agent