



**Short-Term Rental Unit Permit
Operator Application RENEWAL**

This is an Application RENEWAL for:

- Type 1 Operating Permit **Renewal**, *Owner Occupied in Residential District* (Fee \$50.00)
Two (2) Documents demonstrating proof of residency of the owner must be included with renewal which may include: the owner's motor vehicle registration, a valid driver's license or TN identification card, proof of the owner's children's school registration, the owner's voter registration card, and the owner's W-2 mailing

- Type 2 Operating Permit **Renewal**, *Non-Owner Occupied in Non-Residential District* (Fee \$50.00)
If operator is a business entity, proof that the entity is in good standing with the Tennessee Secretary of State must be included with renewal.

1. Location of proposed Short-Term Rental Unit ("STRU"):
Address _____ Zip _____

Zoning District _____

2. What is the Operator's relationship to the STRU? Check all that apply.
 Owner Resident Lessee Other—Please Describe _____

3. What type of dwelling is the STRU?
 Single Family Home Duplex or Townhouse Garage Apartment Condominium
 Apartment in Apartment Building Carriage House Other—Please Describe _____

4. Name of Operator _____
Address of Operator: _____ Zip _____
Phone () _____ Email address _____

NOTE: If the Operator is a business entity, provide the contact details below. Also, attach proof that the entity is in good standing with the Tennessee Secretary of State.

Name _____ Address _____
Zip _____ Email address _____ Phone () _____

5. If Operator is not the Owner of the property, provide below the name, address, email address, and phone number of the Owner of property.

Name of Owner _____ Address _____
Zip _____ Phone () _____ Email address _____

6. If the Operator is not the local contact person for the STRU, provide below the name, address, email address, and all telephone numbers of the local contact person.

Name _____ Address _____
Zip _____ Email address _____ Phone () _____
Alternate Phone () _____ Alternate Phone () _____



**Short-Term Rental Unit Permit
Operator Application RENEWAL**

By signing below:

I ACKNOWLEDGE THAT I HAVE READ AND WILL FOLLOW AND COMPLY WITH ALL SHORT-TERM RENTAL UNIT REGULATIONS AND ORDINANCES, THE CITY'S BUSINESS LICENSE REQUIREMENTS, THE CITY'S OCCUPANCY PRIVILEGE TAX REQUIREMENTS, AND ANY ADDITIONAL ADMINISTRATIVE REGULATIONS IMPOSED NOW OR LATER. IF I AM AN OWNER, BUT NOT THE OPERATOR, I ACKNOWLEDGE THAT I CAN BE HELD LEGALLY RESPONSIBLE AND LIABLE FOR COMPLIANCE WITH CITY OF KNOXVILLE ORDINANCES AT THE SHORT-TERM RENTAL UNIT.

I SHALL DEFEND, INDEMNIFY, AND HOLD HARMLESS THE CITY OF KNOXVILLE AND ITS OFFICERS, REPRESENTATIVES, AND EMPLOYEES FOR ANY AND ALL MATTERS RELATED TO THIS AND THE OPERATION OF THE SHORT-TERM RENTAL UNIT. THE INDEMNIFICATION AND HOLD HARMLESS PROVISIONS STATED HERE SHALL SURVIVE REVOCATION OR EXPIRATION OF THE PERMIT.

____ (INITIALS) IF I RECEIVE A TYPE 1 PERMIT, I UNDERSTAND THAT THE SHORT-TERM RENTAL ADDRESS MUST BE MY PRINCIPAL, OWNER-OCCUPIED ADDRESS AND I WILL PROVIDE REQUIRED DOCUMENTATION WITH THIS RENEWAL.

____ (INITIALS) I ACKNOWLEDGE THAT NOTIFICATION OF NEIGHBORS ADJACENT TO THE PROPERTY IS REQUIRED BY THE CITY'S ORDINANCE AND I HAVE, OR WILL, PROVIDE THAT NOTIFICATION WITHIN TWO BUSINESS DAYS OF APPLYING FOR A PERMIT AND EVERYTIME ANY CONTACT DETAILS CHANGE FOR THE OPERATOR.

I ACKNOWLEDGE THAT THIS AFFIDAVIT IS A "GOVERNMENTAL RECORD" AND IF I MAKE A FALSE ENTRY OR REPRESENTATION IN THIS AFFIDAVIT, THEN I COMMIT A VIOLATION OF TENNESSEE CODE ANNOTATED SECTION 39-16-504. I HAVE CAREFULLY CONSIDERED THE CONTENTS OF THIS AFFIDAVIT BEFORE SIGNING. I AFFIRM THAT THE CONTENTS ARE TRUE, TO THE BEST OF MY KNOWLEDGE.

OPERATOR/APPLICANT:

OWNER (IF NOT OPERATOR/APPLICANT):

Signature

Date

Signature

Date

Printed Name

Printed Name