

## BALDWIN COUNTY BOARD OF COMMISSIONERS



1601 N. Columbia Street, Suite 200 ♦ Milledgeville, GA ♦ 31061 ♦ 478-445-4205 ♦ 478-445-1648 fax ♦ [www.baldwincountyga.com](http://www.baldwincountyga.com)

### SHORT-TERM VACATION RENTAL CERTIFICATE INFORMATION (FOR NEW APPLICATIONS)

Before anyone can offer short-term vacation rentals to the public in Baldwin County, they must obtain a Short-Term Vacation Rental (STR) Certificate and complete an Occupation Registration.

Your application package includes the following:

- a) Information Page
- b) County's STR application (3 pages)
- c) Occupation Registration form (1 page)
- d) Letter of Intent
- e) Letter of Agency
- f) Lodging Tax Information
- g) Public Safety Information form
- h) SAVE Affidavit
- i) E-Verify Affidavit *\*if you have more than 10 employees you must complete this affidavit\**
- j) E-Verify Exemption Affidavit
- k) Copy of the County's Short-Term Vacation Rental Ordinance

The following must be submitted before we can consider your application:

- a) Completed STR application (all 3 pages signed and notarized)
- b) Completed Occupation Registration (signed)
- c) Letter of Intent (signed)
- d) Rental Agreement Example (with required language)
- e) Proof of Ownership
- f) Proof of Homeowner's Insurance
- g) Letter of Agency (if applicable)
- h) Public Safety Information form
- i) SAVE Affidavit (signed and notarized)
- j) E-Verify Affidavit **OR** E-Verify Exemption Affidavit (signed and notarized)
- k) Copy of Valid Driver's License
- l) Application Fee of \$100.00 for Occupation Registration (separate checks)

**The application will not be accepted without all of the above documents.**

The annual fee shall be paid at the time application is made for the certificate. No certificate will be issued until all required information has been submitted and approval has been received from the Tax Commissioner, Building Inspector and/or Fire Marshal, County Clerk, and Chief Building Official.

The entire application package and complete instructions can also be found on the county web site [www.baldwincountyga.com](http://www.baldwincountyga.com). All forms can be filled out on your computer, then printed, signed, and submitted.

#### RENEWALS

Short-Term Vacation Rental certificates are renewable annually by December 31<sup>st</sup>. As a courtesy, by November 1<sup>st</sup> each year, we will send you an application, a copy of our current ordinances and instructions on how to renew your certificate. **IT IS YOUR RESPONSIBILITY TO ENSURE THAT YOUR CERTIFICATE IS RENEWED.**

**BALDWIN COUNTY BOARD OF COMMISSIONERS**



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**APPLICATION FOR SHORT-TERM VACATION RENTALS IN  
BALDWIN COUNTY, GEORGIA**

(A separate rental certificate shall be required for each establishment)

1. **Date of Application** \_\_\_\_\_

2. **Type of Certificate – please check one:**  
 New       Renewal

3. **Annual Rental Certificate Fee per Establishment, \$110.00**

4. **Type of Lodging:**  
 Bed & Breakfast     Boarding House     Private Home

5. **Owner on Record of Dwelling Unit for which a certificate is sought:**

Full Legal Name\* \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address: \_\_\_\_\_

\*(If owner is not a natural person, use separate sheet to identify all partners, officers and/or directors of any such entity, including personal contact information.)

6. **Business Name (if applicable):**

Business Name \_\_\_\_\_

DBA Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

7. **Unit to be used as a short-term vacation rental:**

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

8. **Maximum occupancy** (this shall be the same number as advertised and marketed to potential renters by or on behalf of the owner: \_\_\_\_\_)

\*Owner shall not allow overnight occupancy to exceed the maximum capacity

9. **Who to contact if there are questions regarding the application:**

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Email Address: \_\_\_\_\_

10. **Agent:** (if other than owner) \*Please provide 24-hour contact information This person shall:

- a. Be reasonably available to handle any problems arising from use of the rental unit;
- b. Appear on the premises within 24 hours following notification from the Chief Building Official, or his/her designee, of issues related to the use or occupancy of the premises;
- c. Receive and accept service of any notice of violation related to the use or occupancy of the premises; and
- d. Monitor the rental unit for compliance with the Baldwin County Code of Ordinances

Full Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address: \_\_\_\_\_

11. Owner agrees to use his or her best efforts to assure that use of the premises by short-term vacation rental occupants will not disrupt the neighborhood and will not interfere with the rights of neighboring property owners to the quiet enjoyment of their properties.

12. Applicant must attach the following:

\_\_\_A copy of the standard rental agreement form used between the owner and occupant(s). The agreement must contain the following language: "Occupant is obligated to abide by all of the requirements of the Baldwin County ordinances, state and federal law, and such a violation of any of these rules may result in the immediate termination of the agreement and eviction from the premises, as well as potential liability for payment of fines levied."

\_\_\_Proof of the owner's current ownership of the short-term vacation rental unit (i.e. deed, tax records, etc.)

\_\_\_Proof of homeowner's insurance (must list the owner's name, address of rental unit, and policy dates.)

13. Applicant agrees that the rental certificate applied for by him/her shall not, when granted, become a civil contract between the applicant and the governing authority of the County, but shall operate purely as a rental certificate to the applicant, and said rental certificate may be revoked by the Board of Commissioners of said County at any time.

14. Applicant hereby acknowledges his/her duty to collect a hotel/motel tax and remit same to the County Clerk monthly on or before the 20th day of each succeeding month in which such taxes are collected. **Report is due (even if no rent is collected for the month) on or before the 20th day of the following month.**

15. Applicant herewith tenders the sum of \$110.00 as the rental certificate fee on the business proposed to be conducted by the applicant. Applicant asks that he/she be granted a rental certificate to operate the aforesaid business.

I, \_\_\_\_\_, solemnly swear, subject to the penalties for false swearing as provided under Georgia Law, all information required in this application and supporting documents for a short-term rental certificate is true and correct to the best of my knowledge and I fully understand that any false information may cause the denial or revocation of said certificate. I further state that I have received a copy of Sec. 16.75. - AN ORDINANCE FOR Short-Term Vacation Rental of the Baldwin County Code of Ordinances, have reviewed them and understand the requirements and am authorized to make application for said certificate.

\_\_\_\_\_  
Print full name as signed below

\_\_\_\_\_  
Signature of Owner or Agent\* Title Date

*\*If signed by the Agent, a "Letter of Agency" must be included with the application.*

Sworn to and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Notary Public (SEAL)

*The written application for a rental certificate on file with the Board of Commissioners shall be a permanent record which the certificate holder must maintain current with correct information at all times. The failure to maintain a current application shall be grounds for revocation of a rental certificate.*

\_\_\_\_\_  
(For Baldwin County Office Use Only)

Name of Owner \_\_\_\_\_

Name of Business (if applicable) \_\_\_\_\_

Payment Received: \$ \_\_\_\_\_ Date \_\_\_\_\_ Receipt # \_\_\_\_\_

Approval: (please sign appropriate line below)

Building Inspector \_\_\_\_\_ Date \_\_\_\_\_

Fire Marshal \_\_\_\_\_ Date \_\_\_\_\_

Tax Commissioner \_\_\_\_\_ Date \_\_\_\_\_

Planning & Development Director \_\_\_\_\_ Date \_\_\_\_\_



**20\_\_ OCCUPATION TAX APPLICATION**  
 BALDWIN COUNTY BUSINESS SERVICES  
 1601 N. COLUMBIA ST, SUITE 200  
 MILLEDGEVILLE, GA 31061  
 PHONE: 478-445-4205  
 FAX: 478-445-1648

OFFICE USE ONLY

APPROVED  DENIED DATE: \_\_\_\_\_  
 SIGNATURE OF FIRE DEPT. OFFICIAL  
 \_\_\_\_\_

APPROVED  DENIED DATE: \_\_\_\_\_  
 SIGNATURE OF TAX ASSESSOR OFFICIAL  
 \_\_\_\_\_

APPROVED  DENIED DATE: \_\_\_\_\_  
 SIGNATURE OF LAND USE ADMIN OR BUILDING OFFICIAL  
 \_\_\_\_\_

**APPLICATIONS FORMS MUST BE COMPLETED EACH YEAR**

**EVEN IF ALL INFORMATION REMAINS THE SAME.**

**INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED. CASH OR CHECKS, MADE PAYABLE TO BALDWIN COUNTY PLANNING & DEVELOPMENT, ARE DUE WITH COMPLETED APPLICATION.**

**ALL FORMS MUST BE COMPLETED TO ACQUIRE LICENSE.**

**FOR NEW BUSINESSES:**

1. Submit a plat of the property & a copy of a valid identification card along with the completed application packet.
2. Submit a **non-refundable** \$25.00 fee with completed application.

**FOR RENEWALS:**

1. A completed application packet, even if nothing is changed, must be submitted along with the fee.
2. A copy of a valid driver's license OR I.D. card must be submitted with your paperwork!

**BUSINESS INFORMATION**

**OWNER INFORMATION**

BUSINESS NAME: \_\_\_\_\_  
 BUSINESS LOCATION: \_\_\_\_\_  
 BUSINESS MAILING ADDRESS (If different from location): \_\_\_\_\_  
 CITY, STATE, ZIP: \_\_\_\_\_  
 BUSINESS NUMBER: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 BUSINESS DESCRIPTION: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

OWNER NAME: \_\_\_\_\_  
 MAILING ADDRESS: \_\_\_\_\_  
 CITY, STATE, ZIP: \_\_\_\_\_  
 TELEPHONE NUMBER: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 SOCIAL SECURITY #: \_\_\_\_\_  
 DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 FEDERAL ID #: \_\_\_\_\_  
 SALES TAX #: \_\_\_\_\_  
 EVERIFY #: \_\_\_\_\_  
 STATE LICENSE #: \_\_\_\_\_  
 DRIVERS LICENSE #: \_\_\_\_\_

<b><u>BUSINESS TYPE</u></b>	<b><u>TYPE OF REGISTRATION</u></b>
<input type="checkbox"/> HOME OFFICE	<input type="checkbox"/> NEW
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> RENEWAL (PENALTY OF \$25 APPLIED ON MARCH 2ND)
<input type="checkbox"/> INDUSTRIAL	<input type="checkbox"/> CLOSED (DATE CLOSED: _____)
<input type="checkbox"/> ONLINE	

<b><u>TOTAL # OF EMPLOYEES</u></b>	<b><u>CHECK</u></b>	<b><u>TOTAL TAX DUE</u></b>
1-3	( )	\$100.00
4-9	( )	\$200.00
10-19	( )	\$350.00
20-29	( )	\$500.00
30-39	( )	\$800.00
40-49	( )	\$1000.00
50+	( )	\$1500.00

**TYPE OF OWNERSHIP**  
 SOLE OWNERSHIP  CORPORATION  NON-PROFIT  
 PARTNERSHIP  LLC / LLP

*\*\* I agree to abide by all the laws of the State of Georgia and Baldwin County concerning the sales of any merchandise, product or service for which this license is issued. I understand that the premises must meet all the building and life safety codes and as an applicant I am subject to a criminal background check and if any information given on this application is misrepresented the license may be revoked.\*\**

\_\_\_\_\_  
 SIGNATURE TITLE DATE

**OVER FOR ALCOHOL RELATED BUSINESS LICENSING**

**BALDWIN COUNTY BOARD OF COMMISSIONERS**



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**LETTER OF INTENT FOR  
SHORT-TERM VACATION RENTALS**

I/We, the undersigned owner(s) of real property located in Baldwin County, Georgia, do hereby state our intent is to rent our home to individuals or groups for the purpose of short-term vacations (less than 30 days).

Address of rental home:

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This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Property owner(s):

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Phone: \_\_\_\_\_

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**LETTER OF AGENCY FOR  
SHORT-TERM VACATION RENTALS**

I/We, the undersigned owner(s) of real property located in Baldwin County, Georgia, hereby appoint \_\_\_\_\_ to be my/our Agent for the purpose of applying for a Short-Term Vacation Rental Certificate for the following address:

\_\_\_\_\_  
\_\_\_\_\_

Attached hereto is proof of current ownership of the property to which this Letter of Agency applies.

The above-named Agent hereby is authorized to complete and sign the application for a Short-Term Vacation Rental Certificate on our behalf. We understand that this Letter of Agency will be attached to and made part of the application and will be relied upon by Baldwin County. For and in consideration of Baldwin County accepting this Letter of Agency, we hereby indemnify and hold harmless Baldwin County and its agents and/or employees in the event that the above-named agent should misuse this Letter of Agency and we suffer damages as a result.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Property owner(s):

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Sworn to and subscribed before me

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public (SEAL)

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**PUBLIC SAFETY INFORMATION**

The information requested in this form is for public safety purposes only. Frequently emergencies (i.e. burglary, fire, etc.) occur at business establishments after hours and it is imperative emergency personnel have the ability to contact business owners or employees. Information regarding hazardous materials will also be of great assistance to fire personnel in the event of a fire on the premises.

Business Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Business Telephone Number: \_\_\_\_\_

Does Business have an alarm system? Yes  No

Name of Alarm Service: \_\_\_\_\_

Telephone Number of Alarm Service: \_\_\_\_\_

Does Business have video surveillance cameras? Yes  No

Are hazardous materials (flammables, incendiaries, munitions, explosives, or biohazards) stored on business premises? Yes  No

If yes, please list all hazardous materials:

\_\_\_\_\_

\_\_\_\_\_

Please provide location within building/premises where these materials are stored:

\_\_\_\_\_

Name of electric utility company providing service to business: \_\_\_\_\_

Name of natural gas/propane gas vendor providing service to business: \_\_\_\_\_

List of after-hours contacts to be called in the event of an emergency at the business location:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone #: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone #: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone #: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone #: \_\_\_\_\_



**BALDWIN COUNTY BOARD OF COMMISSIONERS**



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**SAVE Affidavit**

**(U.S. Citizens are only required to provide this affidavit one time)**

By executing this affidavit under oath, as an applicant for a Baldwin County Short-Term Vacation Rental Certificate as referenced in O.C.G.A. § 50-36-1, from the Baldwin County Board of Commissioners, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

**Please check one box only**

- 1)  I am a United States citizen
- 2)  I am a legal permanent resident of the United States
- 3)  I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

\_\_\_\_\_

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1, with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

\_\_\_\_\_

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in \_\_\_\_\_ (city), \_\_\_\_\_ (state).

Signature of Applicant: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date \_\_\_\_\_

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE  
\_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_

Notary Public Signature: \_\_\_\_\_

Affix Notary stamp/seal here

My Commission Expires: \_\_\_\_\_

**BALDWIN COUNTY BOARD OF COMMISSIONERS**



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**E-Verify Affidavit**  
**(For Businesses that have more than 10 employees)**  
**(Required with initial application only)**

By executing this affidavit, the undersigned private employer verifies its compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm or corporation employs more than ten employees and has registered with and utilizes the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-90. Furthermore, the undersigned private employer hereby attests that its federal work authorization user identification number and date of authorization are as follows:

E-Verify Number (must be a number between 4 and 6 digits): \_\_\_\_\_

Date of Authorization: \_\_\_\_\_

Name of Individual or Business: \_\_\_\_\_

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in  
\_\_\_\_\_(city), \_\_\_\_\_(state).

Signature of Owner, Authorized Officer or Agent: \_\_\_\_\_

Printed Name and Title of Owner, Authorized Officer or Agent: \_\_\_\_\_

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE  
\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public Signature

Affix Notary Stamp/Seal here

My Commission Expires: \_\_\_\_\_

**BALDWIN COUNTY BOARD OF COMMISSIONERS**



1601 N. Columbia Street, Suite 200 ♦ Milledgeville, GA ♦ 31061 ♦ 478-445-4205 ♦ 478-445-1648 fax ♦ www.baldwincountyga.com

**E-Verify Exemption Affidavit**  
**(For Businesses that have 10 or less employees)**  
**(Required with initial application only)**

By executing this affidavit, the undersigned private employer verifies that it is exempt from compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm or corporation employs fewer than eleven employees and therefore, is not required to register with and/or utilize the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-90.

Name of Business or Individual: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in  
\_\_\_\_\_ (city), \_\_\_\_\_ (state).

Signature of Owner, Authorized Officer or Agent: \_\_\_\_\_

Printed Name and Title of Owner, Authorized Officer or Agent: \_\_\_\_\_

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE  
\_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public Signature

Affix Notary Stamp/Seal here

My Commission Expires: \_\_\_\_\_

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DEPARTMENT OF REVENUE



**IMPORTANT INFORMATION REGARDING LODGING TAXES**

There are three types of taxes/fees that must be collected if you are renting your home for Short-term Rentals:

1. Baldwin County is authorized to collect a Hotel-Motel Excise Tax in the amount of **8%** under O.C.G.A. § 48-13-51(b). This amount is to be remitted directly to the Baldwin County Board of Commissioners.
2. In addition, the standard sales and use tax is separate from this excise tax and is to be remitted directly to the Georgia Department of Revenue. (The combined sales tax rate for Baldwin County is **8%**. This is the total of state and county sales tax rates. The Georgia state sales tax rate is currently 4%. The Baldwin County sales tax rate is 4%.)
3. The State of Georgia charges a state hotel-motel fee at \$5 per night on each calendar night a hotel room is rented until the rental becomes an “extended stay rental.” An “extended stay rental” is the rental of a hotel room for 31 or more consecutive days to the same customer. This fee only applies to private homes with five (5) or more bedrooms.

**For Example:**

Room Rate (per night)	\$99.00	
Hotel-Motel Tax-8%	\$7.92	Paid to Baldwin County
Sales & Use Tax-8%	\$7.92	Paid to Georgia Department of Revenue
State Hotel Motel Fee	\$5.00 per night (if 5+ bedrooms)	Paid to Georgia Department of Revenue

BALDWIN COUNTY BOARD OF COMISSIONERS  
1601 North Columbia Street, Suite 230  
Milledgeville, Georgia 31061  
(478) 445-4791

MONTHLY HOTEL-MOTEL TAX REPORT FOR THE  
MONTH OF

\_\_\_\_\_, 2 \_\_\_\_

The Hotel-Motel Tax payment is due and payable on or before the twentieth day of the month following each monthly period. Reports not received by the twentieth day shall bear interest and penalty of 1 % per month. This required return should be filed with the Baldwin County Board of Commissioners at the above address, along with the monthly tax payment.

Total Gross Rents	_____
Less: Rents From Permanent Residents	( _____ )
Total Taxable Rents	_____
Amount of Tax Due <b>(8% of Total Taxable Rents)</b>	_____
Less: Collection Fee <b>(3% of Amount of Tax Due)</b>	( _____ )
<b>Balance – Due to Baldwin County</b>	_____

I hereby certify that the information in this report is true and correct.

\_\_\_\_\_  
Signature of Hotel-Motel Operator

Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

## **Sec. 16.75. - AN ORDINANCE FOR SHORT-TERM VACATION RENTAL**

As used in this ordinance “short-term vacation rental” means an accommodation for transient guests where, in exchange for compensation, a residential dwelling unit is provided for lodging for a period of time not to exceed 30 consecutive days. Short-term vacation rental shall not include any residential dwelling unit not regularly offered for rental, which shall be defined as any residence offered for rental less than 14 days in any given calendar year. For the purposes of this definition, a residential dwelling shall include all housing types and shall exclude group living or other lodging uses.

### **(a) Regulations for Short-Term Vacation Rentals.**

Short-term vacation rentals may be offered to the public for rental following issuance of a short-term vacation rental certificate, receipt of an occupation tax certificate, and payment of any and all applicable state and county taxes. Any taxes owed to the County as a result of any hotel/motel tax shall be paid to Baldwin County Board of Commissioners at the Business Services Department and any failure to remit the same or to register pursuant to this Ordinance shall be subject to the penalties included in Chapter 50 Article II of these Code of Ordinances. Owners shall also insure occupants do not disrupt or interfere with rights of adjacent property owners to quiet enjoyment of their property and shall adhere to the following requirements:

- (1) Owners shall not allow occupants to violate any federal state, or local law, statute, rule or ordinances, including, but not limited to, Sections 10-51, 25-19 and Chapter 34-31.
- (2) Owners shall not allow overnight occupancy to exceed the maximum capacity specified in the rental certificate.
- (3) Certificate will be placed near front door in a conspicuous place.

### **(b) Application; fee.**

- (1) An application for a short-term vacation rental certificate shall be submitted, under oath, on a form specified by the Chief Building Official, or his/her designee, accompanied by a fee as set forth by the Baldwin County Board of Commissioners fee schedule, which shall include at a minimum the following information or documentation:
  - a. The name, address, telephone and email address of the owner(s) of record of the dwelling unit for which a certificate is sought. If such owner is not a natural person, the application shall identify all partners, officers and/or directors of any such entity, including personal contact information;
  - b. The address of the unit to be used as a short-term vacation rental;
  - c. The name, address, telephone number and email address of the short-term vacation rental agent, which shall constitute his or her 24-hour contact information and who shall:

1. Be reasonably available to handle any problems arising from use of the short-term vacation rental unit;
  2. Appear on the premises within 24 hours following notification from the Chief Building Official, or his/her designee, of issues related to the use or occupancy of the premises.
  3. Receive and accept service of any notice of violation related to the use or occupancy of the premises; and
  4. Monitor the short-term vacation rental unit for compliance with this chapter;
- d. The owner's sworn acknowledgment that he or she has received a copy of this section, has reviewed it and understands its requirements;
  - e. The owner shall state the maximum occupancy for the residence, which shall be the same number as advertised and marketed to potential renters by or on behalf of the owner.
  - f. The owner's agreement to use his or her best efforts to assure that use of the premises by short-term vacation rental occupants will not disrupt the neighborhood, and will not interfere with the rights of neighboring property owners to the quiet enjoyment of their properties;
  - g. A copy of an exemplar agreement between the owner and occupant(s) which obligate the occupant to abide by all of the requirements of the chapter, and other Baldwin County ordinances, state and federal law, and that such a violation of any of these rules may result in the immediate termination of the agreement and eviction from the premises, as well as potential liability for payment of fines levied;
  - h. Proof of the owner's current ownership of the short-term vacation rental unit; and
  - i. Proof of homeowner's insurance;
- (2) Registration under this code section is not transferrable and should ownership of a short-term vacation rental change, a new application is required, including application fee. In the event of any other change in the information or facts provided in the application, the holder of the short-term rental certificate shall amend the filed application without payment of any additional application fee.

(c) Review of application.

Review of an application shall be conducted by the Chief Building Official, or his/her designee, in accordance with due process principles and shall be granted unless the applicant fails to meet the conditions and requirements of this chapter, or otherwise fails to demonstrate the ability to comply with local, state, or federal laws. Any false statements or information provided in the application are grounds for revocation, suspension and/or imposition of penalties, including

denial of future applications. A certificate shall not be issued unless the owner demonstrates compliance with the applicable codes.

(d) Violations; revocation.

- (1) In any instance in which use of the short-term rental by a guest results in a violation of these ordinances, or any other ordinance of Baldwin County, notice of such violation shall be provided to the short-term vacation rental agent. Failure to remedy any notice of violations may result in the issuance of a citation, which shall be prosecuted pursuant to this Code. Upon a conviction of violation, the Chief Building Official may revoke the short-term vacation rental certificate and reject all applications for the subject premises for a period of 12 consecutive months.
- (2) Short-term rentals occurring on or after January 1, 2021 without a valid rental certificate shall constitute a violation of this Chapter and shall be subject to a minimum fine of \$250.00. Each occurrence shall constitute a separate offense.
- (3) Nothing in this Ordinance shall be construed to limit any action by the Baldwin County Health Department to seek the remediation of any dangerous condition at the short-term vacation rental or to take any action seeking to protect and preserve against any threat to public safety.

(e) Appeal Rights.

- (1) A person aggrieved by the Chief Building Official's decision to revoke, suspend or deny a short-term vacation rental certificate may appeal the decision to the County Manager.
- (2) The appeal must be filed with the County Manager's office in writing, within 30 calendar days after the adverse action and it shall contain a concise statement of the reasons for the appeal. A decision from the County Manager shall be rendered within 5 business days of receipt of the appeal, and may hold any administrative hearing deemed necessary in consideration of the appeal.

(f) Conflicts.

Any ordinances or resolutions as adopted by this Board which are in conflict with these ordinances are hereby repealed and rendered ineffective.