



BALDWIN COUNTY PLANNING & DEVELOPMENT

1601 N Columbia Street, Suite 200 Milledgeville, Ga 31061

Office: 478-445-4205 Fax: 478-445-1648

SHORT-TERM VACATION RENTAL CERTIFICATE APPLICATION

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

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

- a) Completed STR application (all 3 pages signed and notarized)
 - b) Letter of Intent (signed)
 - c) Rental Agreement Example (**with required language**)
 - d) Proof of Ownership
 - e) Proof of Homeowner's Insurance
 - f) Vehicle Parking Plan (location of designated parking areas with how many spaces)
 - g) Docking Plan (location where boats/vessels may be parked and tied to dock) *if applicable*
 - h) Letter of Agency *if applicable*
 - i) Public Safety Information form
 - j) SAVE Affidavit (signed and notarized)
 - k) E-Verify Exemption Affidavit (signed and notarized)
 - l) Copy of Valid Driver's License
 - m) Copy of HOA Homeowners Association Restrictions and/or Regulations (Covenants) *if available*
 - n) Certificate fee \$500 (Checks can be made out to Planning & Development)
- * Refer to copy of the ordinance provided.*

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 Building Inspector and/or Fire Marshal, and Chief Building Official.

The entire application package and complete instructions can also be found on the county web site
www.baldwincountyga.com.

If you are not able to bring/mail the application into the office you can submit the application through email to permits@baldwincountyga.com.

RENEWALS

Short-Term Vacation Rental certificates are renewable annually by December 31st. As a courtesy, by November 1st 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 PLANNING & DEVELOPMENT



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

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

Date of Application

Annual Rental Certificate Fee per Establishment, \$

Type of Lodging:

☐ Bed & Breakfast ☐ Boarding House ☐ Private Home

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."

___ Vehicle parking plan

___ Docking plan *if applicable*

___ 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.)

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.

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.**

Applicant herewith tenders the sum of \$500.00 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.

BALDWIN COUNTY PLANNING & DEVELOPMENT



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:

This _____ day of _____, 20____.

Property owner(s):

Signature: _____

Printed Name: _____

Phone: _____

BALDWIN COUNTY PLANNING & DEVELOPMENT



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)

BALDWIN COUNTY PLANNING & DEVELOPMENT



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 PLANNING & DEVELOPMENT



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 PLANNING & DEVELOPMENT



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: _____

BALDWIN COUNTY BOARD OF COMMISSIONERS



1601 N. Columbia Street, Suite 230 ♦ Milledgeville, GA ♦ 31061 ♦ 478-445-4791 ♦ 478-445-6320 fax ♦ www.baldwincountygga.com

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 (8% of Total Taxable Rents)	_____
Less: Collection Fee (3% of Amount of Tax Due)	(_____)
Balance – Due to Baldwin County	_____

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

Signature of Hotel-Motel Operator

Date: _____

Business Name: _____

Address: _____