

Short Term Vacation Rental Annual Application

Schoolcraft County Zoning Dept
300 Walnut Street #207, Manistique, MI 49854
Zoning Administrator
906-341-3674 / zoning@schoolcraftcounty.us

In accordance with the Schoolcraft County Zoning Ordinance (Section 6.21), this form must be submitted with a copy of the following:

1. Proof of ownership of, or the legal right to rent, a dwelling unit
2. Proof of liability insurance covering vacation rentals for an amount not less than \$500,000 (five hundred thousand dollars)
3. A copy of the list of booking dates anticipated for the term of the Registration
4. A copy of the Local Contact Person's address, phone number, and email address that he/she can be reached at on a 24 hour basis
5. Permit Application Fee of \$250.00 + \$50.00 for each 7 week block

Property Owner(s) or Agent(s) Information:

Name _____ Phone# _____

Email address _____ Parcel # _____

Address of Rental Property _____

Township of Rental Property _____

Number of Sleeping Facilities (beds, etc.) _____ Number of Parking Spaces _____

Mailing Address _____

Signature of Property Owner _____

Signature of Agent _____

The undersigned applicant hereby swears that the information contained in this application together with any attached exhibits or supplemental information is correct and true and that I will comply with all other State and Federal Laws.

Date of Application _____

NOTE: PERMITS EXPIRE ANNUALLY ON JANUARY 14TH OF EACH YEAR. Permits accompanied by a previously issued and still valid Permit shall be automatically renewed each successive year if accompanied by an updated form and the fee as set by the County Board of Commissioners

A copy of section 6.21 with signature and approval # will be provided upon approval of this application. When this is received, please sign and date (owner) and post at the rental location in a visible area for inspections.

