TOWN OF LEXINGTON APPLICATION FOR SHORT TERM RENTAL PERMIT

Please review Local Law No. 3 of 2021/Local Law No. 4 of 2023 before submitting an application. The law has been made available at: https://www.lexingtonnv.com/forms-documents/pages/regulations

Please Return Application to: Code Enforcement Clerk

Town of Lexington

P.O. Box 30

Lexington, NY 12452

If a permit is available, and the application approved, the applicant will be required to pay an **annual fee** made payable to the Town of Lexington for Short Term Rental Registration.

1. Statement of Ownership and Interest Name of Owner(s):
STR Property Address:
911 Address of STR: (if different from above)
STR Tax Map Number: (*See Below)
Number of Bedrooms: Number of Bathrooms:
Maximum Occupancy: (Note that this number may not exceed the Certificate of Occupancy for the property) Owner's Mailing Address:
Owner's Phone Numbers: Home: Cell: Work:
Owner's Email Address:
Owner Type: (Please Check One)
☐ Resident Owner
Owner files their taxes with Lexington as their primary residence
☐ Non-Resident Owner
Owner resides outside of Lexington
Date of Property Purchase:
I/We affirm that the above information is true and correct to the best of my/our
knowledge, and that I/we am/are the owner(s) of the property located at the above STR
Property address.
Signature of Owner(s): Date:
*Your Tax Map Number can be found on your tax bill or online at:

https://egov.basgov.com/townoflexington/

2.	Emergency Contact Information			
	Name of Emergency Contact:			
	Emergency Conta	ct's Phone Numbers:		
	Home:	Cell:	Work:	
	Email Address of	Emergency Contact:		
	•		ue and correct to the best of my/our	
	_		above lives no more than 30 miles from	
the rei violati		vill be available by phone o	or in person in case of an emergency or	
	Signature of Own	er(s):	Date:	
3.	Statement of Cor	npliance		
	I/we hereb	y attest that: (<i>Please initia</i>	l each)	
			\underline{cs} have been recharged $oldsymbol{annually}$ and all	
			n working order in accordance with the	
		st recent version of the Nat	ional Fire Safety Code.	
	Init	ial Here:		
	test Pro Stat	ed within the last 3 years . perty Location is <u>potable a</u> e Sanitary Code, Subpart 5		
	11110	lai nere: D	ate of Most Recent Test:	
	•		ue and correct to the best of my/our	
	•		to my/our knowledge, complies with	
State I	Building Code, Fire	Prevention Code, and Unifo	orm Code.	
	Signature of Own	er(s):	Date:	
4.	Additional Docu	nentation		
	Along with	the completed application	, the following must be submitted:	
	•	y of Water Test		
		st recent, must be within 3 years		
		of of Residency - Resident (
			ver's License OR Voter District Information)	
		tal URL - Renewal Applicar		
	(Lin	k(s) to any and all online listings	s for STR property)	

5. Information

Applications must be fully complete, including all requested documentation, and returned on the original forms provided. If the application is found to be incomplete, it will be returned to the applicant, and will not be considered until the completed application is received. **Applications are considered on a first come first served basis.**

If the application is approved and a permit is issued, information shall be prominently displayed in the Rental detailing adherence to local restrictions and regulations including, but not limited to: noise, garbage disposal, trespassing, snowmobile/ATV usage, snow removal, and parking.

Any **change** in <u>name</u> or <u>contact information</u> of an STR owner(s) and Emergency Contact(s) shall be provided to the Town within (5) days of such change. This includes **email and mailing address changes**. All persons holding an ownership interest in a Short Term Rental shall be required to comply with the provisions of this local law and each shall be liable for any violation thereof.

An inspection of the premises shall be conducted by the Code Enforcement Officer upon initial application. After a period of one year of lawful operation, the Code Enforcement Officer may conduct random inspections to ensure compliance.

Each permit shall have a term of one **calendar year**, and must be renewed by December 15th of each year.

I affirm that I have read the above information as well as the Town of Lexington's Short Term Rental Law.

Signature of Owner(s):	Date:				
For Office Use Only					
App. Received On: Fee Received On:	Documentation Needed:	_			
Permit #:		-			
Application Complete:	Owner Type:				
☐ Yes	☐ Resident				
□ No	☐ Non-Resident				