

# PALMYRA TOWNSHIP SHORT TERM RENTAL APPLICATION

PALMYRA TOWNSHIP, PIKE COUNTY  
115 BUEHLER LANE, PAUPACK, PA 18451  
(570) 226-2230 (101) FAX: (570) 226-2936

## REQUIRED FOR DWELLINGS THAT ARE RENTED FOR 30 CONSECUTIVE DAYS OR LESS

**\* NOTE: TOWNSHIP MUST ISSUE PERMIT IF REQUIREMENTS MET. PLEASE CHECK WITH ASSOCIATIONS FOR RESTRICTIONS PRIOR TO SUBMITTING APPLICATION**

TAX MAP # \_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_

APPLICATION FEE: \$500.00

ANNUAL RENEWAL FEE: \$200.00

### APPLICATION REQUIREMENTS:

1. Check for the applicable fee made out to "Palmyra Township"
2. PLOT PLAN: - size/shape of property, - size/location of existing structures (including septic system), & available on site parking spaces; fire pits
3. Pictures of 911 address signage, Front, Rear, and sides of Principal Building (for identification purposes)
4. All sections of Application MUST BE FILLED OUT
5. Sales Tax License# \_\_\_\_\_
6. Pike County Hotel Excise Tax # \_\_\_\_\_
7. Marketing Entity Identifications

### I. LOCATION OF PROPERTY: PROPERTY MUST HAVE REQUIRED 911 SIGNAGE

Subdivision / Development: \_\_\_\_\_  
911 Street Address: \_\_\_\_\_

### II. DESCRIPTION OF PROPERTY:

SINGLE-FAMILY

Number of Dedicated Bedrooms (80 Sf Min). \_\_\_\_  
Number of Bathrooms \_\_\_\_\_  
Number of Finished Floors \_\_\_\_\_

TWO- FAMILY / MULTI-FAMILY

**DWELLING UNITS #** \_\_\_\_\_  
Number of Dedicated Bedrooms (80 Sf Min). \_\_\_\_  
Number of Bathrooms \_\_\_\_\_  
Number of Finished Floors \_\_\_\_\_

**PARKING: Parking Space Minimum Size: 9'x18' | A minimum of one (1) for each bedroom is required**

**Off Street Parking Spaces**

Tenants: \_\_\_\_\_  
Guests: \_\_\_\_\_

**Parking Space Locations**

Outside: \_\_\_\_\_  
Inside: \_\_\_\_\_

**TYPE OF SEPTIC SYSTEM: (As applicable)**

Individual Subsurface / ESM       Central Collection       Community Subsurface / ESM

**TYPE OF WATER SYSTEM:**  Individual Well       Community Well

# PALMYRA TOWNSHIP SHORT TERM RENTAL APPLICATION

PALMYRA TOWNSHIP, PIKE COUNTY  
115 BUEHLER LANE, PAUPACK, PA 18451  
(570) 226-2230 (101) FAX: (570) 226-2936

## **RECOMMENDED TO BE PROVIDED BY OWNER TO TENANT:**

(a) Fish & Boat Commission Rules (b) PPL Lake Rules; (c) Private Community Rules, Palmyra Township Nuisance Ordinance; Copy of Rental Ordinance, Owner's rules; All contact information for Owner's Local Responsible Party

**IV. IDENTIFICATION** Application *must be signed by all Land Owners, Marketing Agent and Local Contact Persons if other than owners. Property Owner(s) & Local Contact Persons hereby represent that the foregoing information is true, correct, and accurate and request that a permit be issued in reliance upon the truth thereof. Property Owner(s) & Applicant(s) agree to comply with Ordinance No. 132-2019 of Palmyra Township and the Palmyra Township Zoning & Nuisance Ordinance and Labor & Industry regulations issued pursuant thereto and to immediately inform in writing the Enforcement Officer of Palmyra Township in Pike County PA of any change in the information in this application. If in the opinion of the Supervisors, the status of such conditions violates any Federal, State or Local Palmyra Township regulation adopted pursuant thereto, the Township may revoke such permit. The Property Owners, Marketing Agent and Local Contact Person(s) understand that false statements provided herein are subject to the penalties of 18 Pa.C.S.A., Section 4904 relating to unsworn falsification to authorities. An Inspection Fee shall be applied as indicated in the Palmyra Township Schedule of Fees for the processing of this application. Permits are Non-Transferrable.*

## **V. CONTACT PERSONS:**

**(Signatures Below Acknowledge That the Ordinance Has Been Read, Understood, & Intend to Comply)**

**PROPERTY OWNER:** SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PHONE(S); Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Other: \_\_\_\_\_

PRINT NAME(S): \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

**MARKETING AGENT(S):** SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PHONE(S); Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Other: \_\_\_\_\_

PRINT NAME(S): \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

**LOCAL CONTACT PERSON(S):** SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PHONE(S); Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Other: \_\_\_\_\_

PRINT NAME(S): \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_