Village of Grand Beach Annual Rental Registration Application Form Exhibit A

Village of Grand Beach 48200 Perkins Blvd Grand Beach, MI 49117 269-469-5000 rlayman@michianavillage.org

Annual Rental Registration Application

Exhibit A

Rental Unit Address:

Property Owner Name:
Property Owner Name: Owner's Principal Address:
City/State/Zin ⁻
City/State/Zip: Owner's Mailing Address:
(If different than above) City/State/Zip:
Phone: Alternate Phone:
Owner's E-Mail
EMERGENCY CONTACT Name & Phone number:
Primary Contact Name/Local Agent:
(Owner or designated Agent who is the main contact if there are issues at the property
Contact's Address)
City/State/Zip:
Local Agent Contact Mailing Address:
(If different than above)
Local Agent Contact's Phone:
Local Agent Contact's E-Mail:
Waiver/Indemnification
Number of off-street parking spaces
Number of Bedrooms:
Maximum number of occupants:
Smoke Alarms in each bedroom:
Waiver/Indemnification
Street Address Posted in two locations
Short Term Rental Liability Insurance
Carbon Monoxide Alarm on each floor
Two garbage and Two Recycling cans (if more than eight occupants)
Emergency Contact information posted in kitchen
Land Line Telephone

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Advertised Number of Bedrooms: Advertised Maximum Occupancy: Advertised Number of Parking Spaces: The length of the typical rental time frame:	-
Owner/Agent Signature and date acknowledging Village rentals and consent to annual inspection:	-
Owner/Agent Signature and date verifying that there are floor and working smoke alarms in all Bedrooms. I also c at least every 90 days:	ertify that I will test the detectors and alarms
Owner/Agent Signature and date certifying that the prop least one copy of the Village's Rules and Regulations to th	ne renters each time the Dwelling is rented.
Owner/Agent Signature and date certifying that a certific Beach as an additional insured covering Short Term Renta amenities of the dwelling, including, but not limited to, p must be filed with the Clerk's office:	al use of the Dwelling, and liability for all ools, play structures and use of golf carts
FOR OFFICE USE ONLY:	

FOR OFFICE USE ONLY:

Property Address:	

Inspection Date:	
Inspector's Signature:	
Effective Date for Rental:	Expiration date:
Fee Paid:	