

Town of Gates 1605 Buffalo Road Rochester, New York 14624 Ph: (585) 247-6100 Fax: (585) 426-8581

New □ Renewal	
Date Received:	

PROPERTY RENTAL PERMIT APPLICATION

1. Property Information:	
Property Address:	
Vacant Occupied	Tenant 1:
Number of units: Number of bedrooms:	Name:
	Phone#:
2. Contacts:	
Property Owner (Name listed on the property deed):	Management Team:
	Name:
Address:	Address:
Phone#:	Phone#:
	Email:
Rental Property Per	mits must be renewed every three (3) years
Is this a short-term rental property? Yes No _	
dwelling units, and one or more of the dwelling units is or residence for a period of less than three months und	ng or buildings or structure or structures which include one or more rental s occupied or used by one or more persons other than the owner as a home er an arrangement whereby the occupant or occupants thereof pay rent for nclude, but are not limited to, vacation rental homes and what are ments.
Short-term Rental Property permits must be renewed	l yearly
	The Applicant or owner agrees to comply with all applicable laws, n. In addition, the owner will allow the Building Inspector (or authorized aspections.
	nd correct. I understand that the application/permit fee is nonrefundable. I hay result in revocation of the permit and/or subject to criminal penalties
SIGNATURE OF OWNER	DATE

Tenant 2	Tenant 3	
Name:	Name:	
Phone#:	Phone#:	
Tenant 4	Tenant 5	
Name:	Name:	
Phone#:	Phone#	