

CHATHAM COUNTY



DEPARTMENT OF BUILDING SAFETY & REGULATORY SERVICES

1117 Eisenhower Drive, Suite D, Savannah, Georgia 31406
Phone: 912-201-4313 | Fax: 912-201-4301 | <https://buildingsafety.chathamcountyga.gov/>

SHORT TERM RENTAL CERTIFICATE INFORMATION

Before anyone can offer Short Term rentals to the public in Chatham County, they must obtain a Short Term Vacation Rental Certificate and complete an Occupation Registration.

Application Fee Per Establishment, \$350.00

Application package shall include the following:

- STR Application: Complete in its entirety
- Completed Life Safety Compliance Verification Form
- Completed Regulation Form
- Completed HOA Affidavit
- Copy of Driver's License / State ID/ Passport (*all applicants, agents/representative*)
- Notarized Affidavit Verifying Status for County Public Benefit Application (*NOT required for renewals*)
- Notarized Private Employer Affidavit (E-Verify) (*NOT required for renewals*)
- Proof of the owner's current ownership of the short term rental unit and; (*i.e. deed, tax records, etc.*)
- Proof of Homeowner's insurance indicating the property is used as a short term rental (*must list the owner's name, address of rental unit, and policy dates.*)
- A Copy of current Ad Valorem (*property*) tax receipt from Chatham County Tax Commissioner
- Proof of trash pick-up service (*current invoice*)
- Proof of fire service (*current invoice*)
- Diagram of parking
- Proof of advertisement with a marketplace innkeeper for collection of Hotel Motel Tax (*renewals*)

The application will not be accepted without all of the above documents. The entire application package and complete instructions can be found on the county web site www.buildingsafety.chathamcountyga.gov

The annual fee shall be paid at the time application is made for the certificate. No certificate will be issued until all required information has been submitted and approval has been received from the Zoning Administrator, Fire Inspector and Tax Commissioner.

REMINDER:

Your obligations to your covenants or your homeowner association covenants are not overridden or changed by grant of a certificate.

RENEWALS:

Short Term Vacation Rental certificates are renewable annually by June 30th.
Fee amount: \$350

It is the property owner, agent and/or corporation responsibility to ensure that certificate is renewed.

Short Term Rental Address: _____ License # _____

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APPLICATION FOR SHORT TERM RENTALS IN CHATHAM COUNTY, GEORGIA

(A separate rental certificate shall be required for each establishment)

Calendar Year: _____ Certificate No.: _____

Type of Certificate – please check one: New Renewal

Date: _____

1. **Type of Lodging:** Bed & Breakfast Guest House Private Home Single Family Home Duplex or Townhouse Garage Apartment Condominium Apartment in Apartment Building Carriage House Recreational Vehicle Other _____

2. Number of bedrooms: _____ Will entire house be rented? Yes No

If no, how many rooms in residence will be rented? _____

3. Owner on Record of Dwelling Unit for which a certificate is sought:

Full Legal Name* _____

Address _____ City _____ State _____ Zip Code _____

Phone Number _____ Email Address: _____

*(If owner is not a natural person, use separate sheet to identify all partners, officers and/or directors of any such entity, including personal contact information.)

4. Business Name (if applicable):

Business Name _____

DBA Name (if applicable) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ Email Address: _____

Mailing Address (if different) _____

City _____ State _____ Zip Code _____

5. Unit to be used as a short term vacation rental:

Address _____

City _____ State _____ Zip Code _____

Property Identification Number (P.I.N): _____

6. Maximum occupancy (this shall be the same number as advertised and marketed to potential renters by or on behalf of the owner: _____)

*Owner shall not allow overnight occupancy to exceed the maximum capacity.

7. Who to contact if there are questions regarding the application:

Name _____ Phone _____

Email _____

8. Agent: (if other than owner) *Please provide 24 hour contact information

This person shall:

- a. be a valid local point of contact;
- b. be reasonably available to handle any problems arising from use of the rental unit;
- c. appear on the premises within 24 hours following notification from the Fire Inspector, Chatham County or Department of Building Safety & Regulatory Services designee, of issues related to the use or occupancy of the premises;
- d. receive and accept service of any notice of violation related to the use or occupancy of the premises; and
- e. monitor the rental unit for compliance with the Chatham County Code of Ordinances

Full Name _____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ Email Address: _____

9. Owner agrees to use his or her best efforts to assure that use of the premises by short term rental occupants will not disrupt the neighborhood and will not interfere with the rights of neighboring property owners to the quiet enjoyment of their properties.

10. Applicant agrees that the rental certificate applied for by him/her shall not, when granted, become a civil contract between the applicant and the governing authority of the County, but shall operate purely as a rental certificate to the applicant, and said rental certificate may be revoked by Chatham County at any time.

11. Applicant hereby acknowledges his/her duty to collect a hotel/motel tax and remit same to the Chatham County Finance Department monthly on or before the 20th day of the month following the month of collection unless you are renting only through an online platform (VRBO, Airbnb, etc.).

Applicant herewith tenders the sum of **\$350.00** as the Short Term Rental certificate fee on the business proposed to be conducted by the applicant in unincorporated Chatham County. Applicant asks that he/she be granted a Short Term Rental certificate to operate the aforesaid business. I, _____, solemnly swear, subject to the penalties for false swearing as provided under Georgia Law, all information required in this application and supporting documents for a short term rental certificate is true and correct to the best of my knowledge and I fully understand that any false information may cause the denial or revocation of said certificate. If signed by the Agent, a "Letter of Agency" must be included with the application.

Signature of Owner or Agent* Title

Print Name of Owner or Agent* Title

Sworn to and subscribed before me this
_____ day of _____, 20_____.

Notary Public (SEAL)

The written application for a Short Term Rental certificate on file with the Chatham County Department of Building Safety & Regulatory Services shall be a permanent record which the certificate holder must maintain current with correct information at all times. The failure to maintain a current application shall be grounds for revocation of a rental certificate.

*******Official Use Only*******

Zoning: This location Is Is NOT properly zoned for the proposed business use. Zoning District _____

Zoning Administrator: _____ **Date:** _____

Fire Prevention: This proposed business & location Does Does NOT meet the local STR Ordinance

Fire Inspector: _____ **Date:** _____ **Occupancy Load** _____

Tax Commissioner: All taxes owed on the property have been paid Yes No

Tax Commissioner Representative: _____ **Date:** _____

Police Approval:

Any previous complaints from CCPD: Yes No Criminal Background Record: Yes NO

If so, explain: _____

This business and/or applicant: Is Is NOT approved by CCPD.

Police Department: _____ **Date:** _____

Cash Credit Cash Check/M.O. # _____ **Receipt #** _____

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Short Term Rental Life Safety Compliance Verification

- Portable Fire Extinguisher (10-ABC)
- Proof of Garbage/trash Removal Service
- Swimming Pool & it meets state enclosure requirements N/A
(Diagram & location of where the pool is located on property)

I, the undersigned owner, representative and/or agent agree to provide and sustain the above services for the duration of the Short Term Rental license. Failure to sustain the indicated services constitutes a violation of the Chatham County Short Rental Ordinance and represents grounds for suspension or revocation of license.

Executed on _____, 20____ in _____ (City), _____ (State)

Signature of Applicant

Date

Printed Name of Applicant

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Short Term Rental Regulation Sign

Permit Number: _____

A. Parking Rules: (description of parking guidelines, include diagram of parking):

B. Occupancy Rate: No more than two (2) adults per bedroom, plus two (2) additional adults.
Recreation vehicle or tent shall be as listed by manufacturer. **Occupancy Load:** _____

C. Noise Restriction: Shall comply with the Chatham County Noise Ordinance. (Article III, Chapter 24 – Noise Control).

D. Emergency Contract: (MUST BE LOCAL & AVAILABLE 24HRS)

Name: _____ Phone: _____

Email Address: _____ Cell/other: _____

MUST BE POSTED ONSITE

&

RENEWED ANNUALLY

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Short Term Rental HOA Affidavit

On this _____ day of _____, 20_____, first being duly sworn, I,

_____, agree with this affidavit, relating to the Short Term
(Property Owner's Name)

Rental located at: _____ City: _____ ST: _____ Zip: _____

The above Short Term Rental will be conducted according to **Chatham County Short Term Rental Ordinance, Article XIII, Section 16-1304, Qualifications / Requirements of Property Owners to Receive a License**. Which states, each property or rental unit subject to this ordinance shall qualify for a license when all of the conditions in the Short Term Ordinance have been met, including the following:

1. I attest that the Homeowners Association has approved the above-listed dwelling unit to be used as a short term rental.
2. I hereby certify that the information supplied in this form is true and complete, and hereby authorize Chatham County Department of Building Safety and Regulatory Services and all other authorized county officials to make all necessary inquiries to verify its accuracy.
3. Any fraud, misrepresentations, false statements or other attestations that are untrue shall be grounds for immediate revocation of the short term rental license.

Signature of Applying Applicant

Sworn to and subscribed before me this

_____ day of _____, 20_____.

Notary Public (SEAL)

**O.C.G.A. § 50-36-1(E)(2) Affidavit Verifying Status
for County Public Benefit Application**

By executing this affidavit under oath, as an applicant for a Chatham County Georgia Business/Occupational Tax Certificate, Alcohol License, and Special Event as referred in **O.C.G.A. § 50-36-1**, from the **Department of Building Safety and Regulatory Services**, the undersigned applicant **verifies ONLY one** of the following with respect to my application for public benefit:

- 1) I am a United States citizen: **or**;
- 2) I am a legal permanent resident of the United States. **or**;
- 3) I am a qualified alien or non-immigrant under the Federal Immigration and Nationality

Act with an alien number issued by the Department of Homeland Security or other federal immigration agency. ***My alien number issued by the Department of Homeland Security or other federal immigration agency is _____.**

*(A REQUIRED COPY OF ISSUED IDENTIFICATION NEEDED FOR APPROVAL, FRONT & BACK)

The undersigned applicant also hereby verifies that he or she is 18 years or older and has provided at least one secure and verifiable document, as required by **O.C.G.A. 50-36-1(e)(1)**, with this affidavit. **The secure and verifiable document provided with this affidavit can be classified as _____** (such as: state issued driver's license, state issued identification, passport, etc.)

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of **O.C.G.A. §16-10-20** , and face criminal penalties as allowed by such criminal statute.

Executed on _____, 20____ in _____ (City), _____ (State)

Signature of Applicant

Date

Printed Name of Applicant

Sworn to and subscribed before me this
_____ day of _____, 20_____.

Notary Public (SEAL)

Private Employer Affidavit of Compliance Pursuant To O.C.G.A. § 36-60-6(d)

By executing this affidavit, the undersigned private employer verifies its compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm or corporation employs **more than ten (10)** and has registered with and utilizes the federal work authorization program commonly known as E-Verify, or any approved subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-90. Furthermore, the undersigned private employer hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Please check only one:

1. _____ On January 1st of the below-signed year, the individual, firm, or corporation employed ten (10) or fewer employees.
2. _____ On January 1st of the below-signed year, the individual, firm, or corporation employed more than ten (10) employees.

Name of Private Employer (*Business Name As Advertised*)

Date of Authorization

_____ (E-Verify Number)
Federal Work Authorization User Identification Number
*This is NOT your Federal Tax Identification Number

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, 20____ in _____ (City), _____ (State)

Signature of Authorized Officer/Agent

Printed Name of Authorized Officer/Agent

Sworn to and subscribed before me this
_____ day of _____, 20____.

Notary Public (SEAL)

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LETTER OF AGENCY FOR SHORT TERM VACATION RENTALS

I/We, the undersigned owner(s) of real property located in unincorporated Chatham County, Georgia, hereby appoint _____ to be my/our Agent for the purpose of applying for a Short Term Vacation Rental Certificate for the following address: _____

Attached hereto is proof of current ownership of the property to which this Letter of Agency applies. The above named Agent hereby is authorized to complete and sign the application for a Short Term Rental Certificate on our behalf. We understand that this Letter of Agency will be attached to and made part of the application and will be relied upon by Chatham County. For and in consideration of Chatham County accepting this Letter of Agency, we hereby indemnify and hold harmless Chatham County and its agents and/or employees in the event that the above named agent should misuse this Letter of Agency and we suffer damages as a result.

N/A

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, 20____ in _____ (City), _____ (State)

Signature of Property Owner

Printed Name of Property Owner

Sworn to and subscribed before me this
_____ day of _____, 20____.

Notary Public (SEAL)