

STAFF USE ONLY

Date Received: \_\_\_/\_\_\_/\_\_\_ Accepted by: \_\_\_\_\_ Fee Paid: \$ \_\_\_\_\_ DRL NUMBER: \_\_\_\_\_

City of Sanibel Application for DWELLING RENTAL LICENSE and REGISTRATION



Purpose of Application (mark one)

- Initial License and Registration
Annual License and Registration Renewal
Revision to License and Registration

This application must be completed in full and remain updated at all times.

Type of Dwelling Rental (mark one)

- Limited Rental (Fee: \$0) - solely for dwellings being rented exclusively via written lease for longer than 6 months
Limited Rental (Fee: \$300) - rentals limited by City Code to a minimum rental of 28 consecutive days per occupancy
Unlimited Rental (Fee: \$100) - rentals not limited by City Code to a minimum number of days per occupancy

APPLICATION REQUIREMENTS - Submit applications to the Sanibel Finance Department, 800 Dunlop Road, Sanibel. The following information is required for an application to be accepted as complete:

- Completed license registration form.
Check payable to the City of Sanibel OR Credit card payments may be made in person with Visa or Mastercard
Copy of proof of ownership from Lee County Property Appraiser (leepa.org) OR copy of deed of ownership
Copy of City's active Business Tax Receipt OR provide number for the dwelling rental BTR -
Copy of Lee County Tourist Development Tax paid through Lee County Clerk of Courts, available to property owners by contacting Lee County Clerk of Courts (leeclerk.org).
Copy of active Certificate of Registration with the Florida Department of Revenue for Florida State Sales Tax (floridarevenue.com)
Notarized Property Owner's Affidavit required per City of Sanibel Ordinance No. 19-007 (attached; see page 3)

In the registration and licensure of such use, or in the renewal of a license, the City Manager or City Council shall have authority to require such reasonable conditions as necessary to protect the public health, safety and general welfare and to ensure that the use, value and qualities of the neighborhood surrounding the proposed location will not be adversely affected.

PROPERTY OWNER / APPLICANT

Name(s): \_\_\_\_\_

Telephone (home): \_\_\_\_\_ Telephone (mobile): \_\_\_\_\_

Address of Dwelling Rental: \_\_\_\_\_

Property Identification Number (STRAP): \_\_\_-\_\_\_-\_\_\_-\_\_\_-\_\_\_-\_\_\_-\_\_\_-\_\_\_-\_\_\_-\_\_\_

E-mail: \_\_\_\_\_

Check one of the following:

- This is my primary residence.
This is not my primary residence. My primary residence address is listed below.

Owner's Primary Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**LOCAL EMERGENCY CONTACT**

During the term that the Dwelling Rental is occupied, the following person must be available 24 hours a day 7 days a week and able to respond to an emergency on the property. **This can be the property owner or a property manager.**

Name or Company: \_\_\_\_\_

Telephone: \_\_\_\_\_ Secondary Telephone (if available): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail: \_\_\_\_\_

**THIS SECTION ONLY REQUIRED TO BE COMPLETED IF THE OWNER CHOOSES TO ASSIGN AN AGENT TO SUBMIT THE APPLICATION ON BEHALF OF THE OWNER**

**Property Owner Authorization for Submittal & Correspondence *Notarization Required***

I hereby authorize the following to file this application with the City of Sanibel for processing and to communicate with the City regarding this application:

Agent's Name and Company: \_\_\_\_\_

Telephone (Office): \_\_\_\_\_

Telephone (Mobile): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_

**NOTARY INFORMATION**

State of \_\_\_\_\_  
County/Province of \_\_\_\_\_  
Country of \_\_\_\_\_

*Seal*

The foregoing instrument was affirmed, subscribed, and acknowledged before me by means of  physical presence or  online notarization, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ (name of person making statement), who

is personally known to me or  has produced \_\_\_\_\_ as identification.

Notary Public Printed Name \_\_\_\_\_

Notary Public Signature \_\_\_\_\_ Commission Expires \_\_\_\_\_

**STAFF REVIEW (For Staff Use Only)**

**Dwelling Rental Allowed: Limited or Unlimited (circle one)**

**Payment Received: \$100 or \$300 (circle one)**

**Permit Issued or Denied or Application Returned (circle one)**

**On \_\_\_\_\_ by \_\_\_\_\_**



# City of Sanibel Dwelling Rental License Property Owner's Affidavit

I, \_\_\_\_\_ certify that the property located at \_\_\_\_\_,

(Printed Name of Property Owner)

(Rental Property Address)

in Sanibel, FL, complies with the following City of Sanibel Dwelling Rental requirements:

- Owner has reviewed and understands the City's rental use regulations including Sections 126-1075, 126-1076, 126-1077 and 126-1078 of the City of Sanibel's land development code. (Available for review at [www.mysanibel.com](http://www.mysanibel.com)); and
- **City license number must be included on all advertisements for this dwelling rental;** and
- Dwelling rental licenses are non-transferable

I acknowledge by signing this agreement that the information provided in this form is true and that falsification of any information is grounds for termination of my dwelling rental registration, any issued license and/or business tax receipt.

Property Owner Printed Name: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_

### NOTARY INFORMATION

State of \_\_\_\_\_

County/Province of \_\_\_\_\_

Country of \_\_\_\_\_

The foregoing instrument was affirmed, subscribed, and acknowledged before me by means of  physical presence or  online notarization, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ (name of person making statement), who  is personally known to me or  has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public Printed Name

(seal)

Commission Expires \_\_\_\_\_

\_\_\_\_\_  
Notary Public Signature