



City of Stevenson

Phone (509)427-5970
FAX (509) 427-8202

7121 E Loop Road, PO Box 371
Stevenson, Washington 98648

20__ Vacation Rental Application

(Stevenson Sales Tax Location Code 3002)

Vacation Rental Address: _____

Vacation Rental Tax Lot #: _____ Vacation Rental Telephone #: _____

WA State Business License (UBI) #: _____ Tax Reporting Frequency: _____

Owner Name: _____

Phone #: _____

Email Address: _____

Permanent Residence: _____

City: _____

State: _____ ZIP: _____

Mailing Address: _____

City: _____

State: _____ ZIP: _____

Contact Person: _____

Phone #: _____

Email Address: _____

Contact Person Address: _____

City: _____

State: _____ ZIP: _____

Mailing Address: _____

City: _____

State: _____ ZIP: _____

If the Owner is not a permanent resident of the Local Area (Clark, Klickitat, or Skamania counties in Washington, Hood River or Multnomah counties in Oregon), **a Contact Person from the Local Area is required.**

Submittal Checklist: Fill in the information requested and initial each statement to certify its truth and accuracy.

_____ This vacation rental home will collect and remit state and local sales and use taxes and special hotel/motel taxes as required by the City and State of Washington Department of Revenue.

_____ The City is authorized reasonable access to the vacation rental home to carry out the administrative duties of SMC 5.20. The last Vacation Rental Inspection was conducted on _____.

_____ The annual neighborhood notice will be sent or handed out to all owners and/or occupants of adjacent and abutting property.

_____ This vacation rental home will maintain liability insurance covering its use as a vacation rental home.

_____ The City has the right to provide the names and phone numbers of the owner and contact person to help resolve disruptions caused by the vacation rental home.

_____ The Good Neighbor Guidelines will be provided to guests of the vacation rental home. The Guidelines ☐ will ☐ will not be incorporated into the occupant's rental contract.

_____ There are _____ off-street and _____ on-street parking spaces available to the vacation rental home. It is understood that on-street spaces are not for the exclusive use of the vacation rental home, and a diagram of parking spaces will be provided to guests which expresses this.

Incomplete applications will not be accepted. ● Please ensure that all fees & submittals are included

Applicant Name: _____ Signature: _____ Date: _____

☐ Check here if this property is no longer used as a Vacation Rental Home

Office Use Only:	Application Fee:		
Account	Date:	Receipt #:	License #:
#001 000 000 321 90 00			