



**City of Lighthouse Point**

**Transient Rental Certificate Application**

**Initial (I)** \_\_\_\_\_ **Renewal (R)** \_\_\_\_\_ **Modification (M)** \_\_\_\_\_  
**\$750** **\$500** **\$150**

*Transient Rental* shall mean any unit or group of units in a condominium or cooperative or any individually or collectively owned single-family, two-family, three-family, or four-family house or Dwelling unit that is rented to Transient Occupants for periods of six (6) months or less, or which is advertised or held out to the public as a place rented to Transient Occupants, including, but not limited to, Vacation Rentals.

The owner is required to obtain an annual Transient Rental Certificate of Compliance for each dwelling unit prior to renting any dwelling unit as a Transient Rental. A Transient Rental Certificate of Compliance is nontransferable. A transfer of ownership of a Transient Rental shall require the new owner to obtain a new Transient Rental Certificate for the Transient Rental.

Certificates of Compliance are valid for no more than one (1) year, and all Certificates expire September 30 of each year regardless of when issued.

**Date of Submittal** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
**Month Day Year**

**Applicant/Property Owner:**

\_\_\_\_\_  
Property Owner Name (Name/Entity)

\_\_\_\_\_  
Mailing Address (Street, City, State, and Zip Code)

\_\_\_\_\_  
Daytime Phone / Cell Phone / Email Address

**Transient Rental Responsible Party**

\_\_\_\_\_  
Name of Responsible Party (available 24 hours a day, 7 days a week):

\_\_\_\_\_  
Local Address (Street, City, State, and Zip Code)

\_\_\_\_\_  
Contact Phone Number \* / Alternate Phone / Email Address

- Main Contact Phone Number must be answered twenty four (24 hours a day, seven (7) days a week.

**Acceptance of Responsible Party (signature):** \_\_\_\_\_

**Legal Description of Property:**

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Block                      Lot                      Subdivision                      Parcel ID

\_\_\_\_\_  
 Street Address (Street, City, State, and Zip Code)

**Acknowledgment of Owner to terms of Compliance  
 (Please initial each item)**

\_\_\_\_\_ All vehicles associated with the Transient Rental must be parked on hard surface off-street parking provided on the property, and no more than one (1) vehicle per bedroom in the Transient Rental shall be permitted;

\_\_\_\_\_ The Transient Occupant of any Transient Rental shall comply with the noise limitations of Section 42-448(4)(a) of Ordinance 2015-0926.

\_\_\_\_\_ The owner of the property shall comply with all applicable City, County, State and Federal laws, rules, regulations, ordinances and statutes.

\_\_\_\_\_ Neither the property that is the subject of this application, nor any other property owned by the titled owner of the property that is the subject of this Application, are in violation of any section of the Code of Ordinances of the City of Lighthouse Point.

\_\_\_\_\_ There are no unsatisfied City liens recorded against the property that is the subject of this application, or any other property owned by the titled owner of the property that is the subject of this application, as a result of any violation of any section of the Code of Ordinances of the City of Lighthouse Point.

\_\_\_\_\_ No solid waste or recycling container for the property that is the subject of this application shall be located at the curb for pickup before 6:00 p.m. of the day prior to pick up, and the solid waste and recycling containers shall be removed before 9:00 p.m. of the day of pickup.

\_\_\_\_\_ Whoever, without being authorized, licensed, or invited, willfully enters or remains in any structure or conveyance on a Residential Property, or, having been authorized, licensed, or invited, is warned by the owner or Transient Occupant, to depart the property and refuses to do so, commits the offense of trespass in a structure or conveyance.

\_\_\_\_\_ Other properties are not jointly shared commodities and should not be considered available for use by Transient Occupants of the Transient Rental subject of the application.

\_\_\_\_\_ Prior to permitting occupancy by a Transient Occupant, the owner shall confirm that such occupancy is not prohibited by the City’s sexual offender and predator residency prohibitions set forth in Sections 54-9 through 54-12 of the City’s Code of Ordinances.

**All the following must be submitted to have a complete application submittal:**

- \_\_\_\_\_ **Complete Transient Rental Application (I, R, M)**
- \_\_\_\_\_ **Correct Fee** (check or money order payable to the City of Lighthouse Point) **(I, R, M)**
- \_\_\_\_\_ **Proof of Ownership** (i.e.: Recorded Deed or BCPA page) **(I, R, M)**
- \_\_\_\_\_ **Proof of Registration with the Florida Department of Revenue for Sales Tax, or proof that no sales tax collection is required for the use (I, R, M)**
- \_\_\_\_\_ **VACATION RENTALS ONLY: Proof of Registration with the Broward County for the Tourist Development Tax (I, R, M)**
- \_\_\_\_\_ **VACATION RENTALS ONLY: Proof of Licensure with the Florida Department of Business and Professional Regulation for Transient Public Lodging Establishment (I, R, M)**
- \_\_\_\_\_ **Copy of form of Transient Rental Agreement (I)**
- \_\_\_\_\_ **Exterior Sketch** (Drawn to scale: all structures, pools, fencing, off street parking spaces, trash containers) **(I,M)**
- \_\_\_\_\_ **Interior Sketch** (Drawn to scale: floor plan, bedrooms/sleeping rooms (numbered), exits, smoke/carbon monoxide detectors, and fire extinguishers) **(I, M)**
- \_\_\_\_\_ **Fire Extinguisher Inspection Certificate (I, R, M)**
- \_\_\_\_\_ **Smoke/Carbon Monoxide Detector Inspection Certificate (I, R, M)**
  
- \_\_\_\_\_ **\*Power of Attorney** – If property owner is using a third party to operate the rental, need a Power of Attorney signed by the owner giving the third party permission to operate the Transient Rental on the owners behalf

**NOTE:** Transient Rental properties claiming Homestead Exemption will be reported to the Broward County Property Appraiser.

**Are you requesting a Reasonable Accommodation be granted based on Federally Recognized Disabilities?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**If yes, please briefly explain and proceed pursuant to Section 42-455 of Ordinance 2015-0926:**

\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION**

**I have reviewed Ordinance No. 2015-0926 and certify that all provisions and regulations set forth therein shall be met.**

**I am familiar with the information contained in this application, and that to the best of my knowledge such information is true, complete, and accurate.**

**I grant the City of Lighthouse Point the right to inspect the premises of the Transit Rental prior to the issuance of the initial Certificate of Compliance and for the required annual inspections.**

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

SWORN TO (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is known to me or has presented identification, and who did take an oath.

\_\_\_\_\_  
Signature of Notary Public [SEAL]