APPLICATION: ZONING TOURIST ROOMING HOUSE PERMIT ZTRHP1-A

City of Madison

Building Inspection Division: Zoning Dept. Madison Municipal Building, Suite 017 215 Martin Luther King, Jr. Blvd.

P.O. Box 2984

Madison, WI 53701-2984 phone: (608) 266-4551 web: cityofmadison.com/trh

email: zoningTRH@cityofmadison.com

TRANSLATION SERVICES

If you need an interpreter, translator, materials in alternate formats or other accommodations to access these forms, please call the Building Inspection Division at (608) 266-4551.

Si necesita interprete, traductor, materiales en diferentes formatos, u otro tipo de ayuda para acceder a estos formularios, por favor llame al (608) 266-4551.

Yog tias koj xav tau ib tug neeg txhais lus, txhais ntawv, los sis xav tau cov ntaub ntawv pab kom paub txog cov lus ghia no, thov hu rau Chaw Haujlwm Koog Soj Ntsuam Tsev (Building Inspection Division) (608) 266-4551.

PRIMARY RESIDENCE • ZTRHP1 PERMIT				
FOR OFFICE USE ONLY:				
☐ Application Fee Paid via Date				
ZTRHP1				
Application Received Date				
Application Completeness by Date				
☐ Inspection Complete Date				
☐ Annual Permit Fee Paid Date				
☐ Permit Issued Date				
☐ Permit Denied Date				

APPLICATION FORM

Unit #:
HP1-C Condominium Association permission must be included
☐ ADU ☐ 2-unit building ☐ Multi-unit building
Transient Room Tax Permit #
mum number of guests is the lesser of two times the number of legal nall not count towards the maximum number of guests.
May not be an LLC, trust, nonprofit or other corporate entity
List full names of all Cohosts
DBA name (if applicable)
Unit # City/State/Zip
Email
Tenant
Company
DBA name (if applicable)
Unit # City/State/Zip
Email

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PRIMARY RESIDENCE • ZTRHP1 PERMIT (CONTINUED)

4	. Submit the following items with your application
	No application will be accepted without all of the following:
	☐ ZTRHP1-A Permit Application: completed Zoning Tourist Rooming House (ZTRHP1) Permit Application:
	 Public Health Madison & Dane County (PHMDC) Tourist Rooming House License number. Visit PublicHealthMDC.com/STR to apply.
	☐ City of Madison Transient Room Tax Permit number. Click here to apply.
	☐ ZTRHP1-B Residence Affidavit: Separate form for each Host & Cohost. (Free notary services available at city agencies.)
	☐ ZTRHP1-C Condominium Association Approval (Condos only): which explicitly states TRH operation is allowed in unit.
	☐ <u>ZTRHP1-D</u> Advertising Locations : Listing of all websites and places where operator has previously listed their TRH and where operator intends to advertise in the upcoming year.
	☐ ZTRHP1-E Guest Registry: Sample of guest registry template. If rentals occurred in past, show all past rentals.
	☐ ZTRHP1-F Floor plans: of your TRH dwelling unit with all legal bedrooms labeled and numbered.
	☐ <u>ZTRHP1-G</u> Notice to property owner (Tenants only): which describes the TRH operation, maximum number of guest allowed and how the operation will meet zoning code regulations.
	☐ ZTRHP1-G Lease Attachment (Tenants only): Copy of lease which explicitly states TRH operation is allowed in this unit
	Application Fee: \$300. Checks payable to City of Madison. Cash, checks, VISA, MasterCard accepted at the Zoning Counter.

☐ **Submit**: Online, or by mail or email to zoningTRH@cityofmadison.com and with mailed check, or drop off at Zoning

5. Agreements and signature

Please initial that you understand and will abide by the following agreements:

Counter after making Zoning Review Counter appointment. See address on previous page.

Agreement	✓	Initials
My valid ZTRHP permit number will be displayed on all advertisements and listings on any hosting platform or other type of advertising.		
I understand I may not book or rent to more than one reservation party on any given date unless I am on site on all of the overlapping rental nights.		
I understand that I am only allowed to be absent from the dwelling for a maximum of 30 nights per licensing year when rentals are occurring.		
I will submit quarterly report form <u>ZTRHP-QR</u> each quarter year to City Zoning, which lists all websites and locations where I have advertised my TRH in the previous quarter and lists names and contact information of all reservation holders, all dates of stays, whether I was on site or off site each night of every guest stay that quarter.		
I understand the collection of room tax is required and this may require me to remit room tax directly to the City Treasurer's Office each quarter year.		
I will not exceed the maximum tourist occupancy (the allowable number of guests.)		
I have reviewed form ZTRHP1-INFO and am familiar with the Tourist Rooming House regulations in the City of Madison. I understand that failure to comply with all regulations may result in grounds for suspension or revocation of my permit and if permit is revoked, fines may be doubled.		
Permit is issued to a specific host. Permit is non-transferable. Permit does not authorize any person, other than the person named therein, to operate a short-term rental home in the dwelling unit.		
I acknowledge that I am to notify the City of Madison Zoning Department within three (3) days if I move and this address is no longer considered my primary address.		
Acceptance of application packet by the city does not constitute the issuance of a permit. Application is subject to review, verification, and inspection before approval may be granted; then payment of annual permit fee before permit is issued. A valid ZTRHP permit must be issued before the property can be offered, advertised, or rented.		

Printed Name:	Signature:	Date: