

Hamden Town Clerk
P.O. Box 32
Hamden, NY 13782
(607) 746-6660

Short Term Rental (STR) Application Form

Contact Information			
Property Owner:			
Address:			
	Street Address	Town	Zip Code
Phone Number:			
	Day time	Night Time	
Designated Local Manager:			
Address:			
	Street Address	Town	Zip Code
Phone Number:			
	Day time	Night Time	
Additional Information			
STR Address:			
	Street	Town	Zip Code
Tax ID Number			
Source of Domestic Water (check one)	<input type="checkbox"/> Private <input type="checkbox"/> Municipal		
Insurance information			
	Insurance Company	Policy Number	
Description of the STR (a brief description of each bedroom and sleeping room) If a floor plan is attached N/A this line:			
Required Documents (check one)			
Fire and Safety Compliance: The applicant shall attach an emergency plan (egress, who to call in an emergency, and short term rental address). <input type="checkbox"/> Attached			
Floor Plan	<input type="checkbox"/> Attached <input type="checkbox"/> Not attached (If not attached description of STR needs to be filled out)		
Copy of the registration with Delaware County or provide the registration number. <input type="checkbox"/> Attached <input type="checkbox"/> Not attached Registration number <input style="width: 150px; height: 15px;" type="text"/>			
House Rules	<input type="checkbox"/> Attached		