SHORT-TERM RENTAL (STR) & HOTEL OCCUPANCY TAX REGISTRATION FORM

AUSTIN CITY CODE 11-2 | AUSTIN CITY ORDINANCE NO. 20130926-144

TYPE OF ESTABLISHMENT:
(OWNER-OCCUPIED) SHORT-TERM RENTAL SECONDARY STRUCTURE

LICENSE:
STR-TYPE 1 SECONDARY

(OWNER-OCCUPIED) SHORT-TERM RENTAL SECONDARY STRUCTURES ARE (1) RENTED FOR PERIODS OF LESS THAN 30 CONSECUTIVE DAYS, (2) ASSOCIATED WITH AN OWNER-OCCUPIED PRINCIPAL RESIDENTIAL UNIT, AND (3) AN ENTIRE DWELLING UNIT.

STR/HOTEL INFORMATION

STR/HOTEL NAME:

COUNTY:

STR/HOTEL ADDRESS:

* CITY:

STATE:

ZIP CODE:

DATE OPEN FOR BUSINESS:

NUMBER OF SLEEPING ROOMS:

OCCUPANCY LIMIT:

AVERAGE CHARGE PER STRUCTURE:

* FOR SHORT-TERM RENTAL LICENSING, ALL HOTELS MUST BE LOCATED WITHIN THE CITY OF AUSTIN'S FULL PURPOSE OR LIMITED PURPOSE JURISDICTIONS. FOR HOTEL OCCUPANCY TAX, ALL HOTELS MUST BE LOCATED WITHIN THE CITY OF AUSTIN'S FULL PURPOSE JURISDICTION.

STR/HOTEL CONTACT INFORMATION

NAME OF LOCAL CONTACT:

LOCAL CONTACT EMAIL ADDRESS:

LOCAL CONTACT STREET ADDRESS:

CITY:

STATE:

ZIP:

☐ IS THE STREET ADDRESS AND MAILING ADDRESS THE SAME?

LOCAL CONTACT MAILING ADDRESS:

CITY:

STATE:

ZIP:

TELEPHONE NUMBER:

EXT:

FAX NUMBER:

PROPERTY OWNER INFORMATION

☐ IS THE OWNERSHIP INFORMATION THE SAME AS THE CONTACT INFORMATION?

PROPERTY OWNER NAME:

PROPERTY OWNER EMAIL ADDRESS:

PROPERTY OWNER STREET ADDRESS:

CITY: STATE: ZIP:

PROPERTY OWNER MAILING ADDRESS:

CITY: STATE: ZIP:

TELEPHONE NUMBER: EXT: FAX NUMBER:

INSURANCE POLICY INFORMATION

INSURANCE COMPANY NAME:

TELEPHONE NUMBER: EXT:

INSURANCE COMPANY STREET ADDRESS:

CITY: STATE: ZIP:

POLICY NUMBER:

REGISTRATION FORM VERIFICATION

☐ **I DECLARE THAT THE INFORMATION CONTAINED IN THIS DOCUMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.**

OWNER'S SIGNATURE: _____ DATE: _____

PRINT NAME: _____

OWNER'S SIGNATURE: _____ DATE: _____

PRINT NAME: _____

OWNER'S AGENT SIGNATURE: _____ DATE: _____

PRINT NAME: _____

Please complete the following steps to apply for a Short-Term Rental License (STR) from the City of Austin, as required for the operation of all Short-Term Rental Establishments:

* Print the Application
* Check the box next to the Acknowledgment Statement and sign the application. The application MUST be signed by all owners listed on the Appraisal District's Records and the owner's agent, if applicable
* Execute a Check or Money Order in the amount of $443 which includes the $393 Annual Licensing Fee and the $50 one-time Notification Fee, payable to the "CITY of AUSTIN"
* MAIL via USPS Certified Mail/Return Receipt Requested the Short-Term Rental Application with the required supporting documentation and licensing fee to:

City of Austin
Code Compliance Department
Attn: Finance - STR
PO Box 1088,
Austin, TX 78767