

Short-Term Rental Application

City of Waveland
301 Coleman Avenue
Waveland, MS 39576
Phone: (228) 466-2549

Property Information:

Address: _____ Parcel#: _____

Is the property in a subdivision? NO ___ YES ___; Subdivision name: _____

HOA? NO ___ YES ___ Mailing Address: _____ Number of Bedrooms: _____

Owner Information:

Name: _____ Address: _____

Mailing Address, if different from above: _____

Phone: _____ Cell Phone: _____ Email: _____

I HEREBY CERTIFY THAT I HAVE READ THIS APPLICATION AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT; I ACKNOWLEDGE RECEIPT OF AND AGREE TO COMPLY WITH THE RULES & REGULATIONS OF THE SHORT-TERM RENTAL ORDINANCE, ALL APPLICABLE CODES, ORDINANCES, FEDERAL AND STATE LAWS. VIOLATIONS OF ANY CODES OR REGULATIONS SHALL RESULT IN THE SUSPENSION OR REVOCATION OF THE PERMIT; AND, IF THE LOCAL CONTACT PERSON CHANGES, I **WILL NOTIFY THE COMMUNITY DEVELOPMENT DEPARTMENT WITHIN 24 HOURS.**

Owner's Signature: _____ Date: _____

Local Contact Person Information:

Name: _____ Address: _____

Mailing Address, if different from above: _____

Phone: _____ Cell Phone: _____ Email: _____

Local Contact Person's Signature: _____ Date: _____

Required Documents:

SEE PAGE 2 (SHORT-TERM RENTALS CHECKLIST)

OFFICE USE ONLY

Zoning Designation: _____. City Building Dept.: Approve ___ Deny ___ Sign: _____ Date: _____

Fire Inspector: Approve ___ Deny ___ Sign: _____ Date: _____

Max No. bedrooms: ___ Max No. of Occupants: ___ Max No. of vehicles ___ Attach Parking Plan: ___ STR# of 150: ___

SHORT TERM RENTALS CHECKLIST

1. \$350 Application fee (check, or card)
2. \$20 Privilege License fee
3. Mississippi State Tax I.D. or Social Security Number
4. Receipt for Waste Management Plan and Utility Bill for Two Garbage Containers
5. Receipt from Waveland Water Services Bill for Commercial Water Use
6. Picture copy of applicant(s) driver's license
7. Picture copy of local contact(s) driver's license
8. Local Contact form (please see application)
9. Copy of Warranty Deed (Please see County Chancery Clerk's Office)
10. Proof of removal from or no involvement in Homestead Exemption (Please see County Tax Assessor's Office)
11. Covenants Affidavit - (notarized; no restrictive covenants where you are proposing to operate STR)
12. Floor plan - (must show all fire equipment and life safety equipment; must be posted in the STR)
13. Emergency Escape plan - (must also be posted **in** the house per Fire Department)
14. Parking plan- (digital or drawn; indicate no. of spaces and locations on premises - **1 space per bedroom**)
15. House rules - (must be neatly stored in a binder or similar booklet in STR, in public view)
16. House rental agreement (must be stored in a binder with house rules)
17. Picture of home from abutting street (must show visible house numbers)

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Restrictive Covenants Affidavit

I, _____, hereby acknowledge that by signing and notarizing this affidavit, there are no restrictive covenants within the area or subdivision I intend to operate which will prohibit me from operating a commercial business (Short-Term Rental).

If it later shall be determined that restrictive covenants prohibit short term rentals in this area, I, _____ indemnify and hold harmless the City of Waveland, agents, employees, and officials from any claims and actions arising from the violation of such covenants, including the recovery of reasonable attorney fees and costs.

Applicant Signature

Date

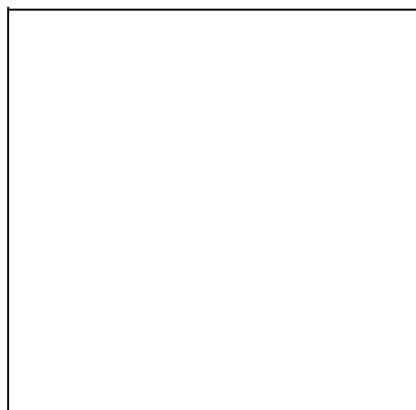
**The State of Mississippi
County of Hancock**

Personally appeared before me, the undersigned authority in and for the said county and state, sworn to and

subscribed on this _____ day of _____, 2024, within my jurisdiction, the within named _____, who acknowledged that he/she executed the above and foregoing instrument.

Public Notary Name

Public Notary Signature



Please Place the Notary Stamp Here

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SHORT-TERM RENTAL INSPECTION CHECKLIST

Observation Date: _____

Owner Name _____

Address _____ Cabin /Apt.# _____

Permit# _____ Date of Final _____ # of Bedrooms _____

_____ Address numbers should be reflective and clearly visible from the street and affixed to the exterior of the building, a minimum of four inches tall with a one-half (1/2)- inch stroke, of color and design in contrast to the background on which the numbers are affixed.

_____ Two garbage cans

_____ Fences and gates properly secured around the property, home, and amenities.

_____ Handrails on any steps that exceed a grade of thirty (30) inches or more than three (3) step risers.

_____ All stairs and raised structures are code-compliant and secured with guardrails.

_____ Number of bedrooms is compliant with the applicable zoning and building code occupancy rate

Welcome book contains the following:

_____ House Rules

_____ House Rental Agreement

_____ House Emergency Escape Plan/ House Floor Plan. Laminated, Posted, Minimum 8.5" x 11" Containing address, extinguisher location, and Escape Route.

_____ House Contact and Local Contact

_____ Privilege License

Fire Extinguishers:

_____ Minimum I Serviceable, Date stamped/ Tagged, Extinguisher of at least 2-A IO-BC rating. Plastic hardware is not acceptable, must be metal.

_____ Extinguisher shall be mounted no higher than five feet (5') and no lower than three feet (3') from the floor.

_____ Extinguisher shall be Underwriters Laboratory (UL) Listed or approved by the State Fire Marshal.

