

SBL: _____

Application Date: _____

TOWN OF WOODSTOCK



BUILDING DEPARTMENT

45 Comeau Drive, Woodstock NY 12498 Tel: 845-679-2113x13 • E-mail building@woodstockny.org

APPLICATION FOR SHORT TERM RENTAL PERMIT

OWNER OCCUPIED: HOME (1-2 BEDROOMS) ESTABLISHMENT (UP TO 5 BEDROOMS)
NON OWNER-OCCUPIED: HOME (1-2 BEDROOMS) ESTABLISHMENT (UP TO 5 BEDROOMS)

Property Owner : _____
(If LLC provide list of owners/ corporation papers)

Property Location: _____

Mailing Address: _____

Contact Phone #'s: _____

Email: _____

(If non owner occupied)

Prop. Manager/ Host: _____

Contact Phone #'s: _____

Email: _____

of Bed Rooms _____ #Off street parking spaces: _____

Pool/Hot tub _____ Yes _____ No

Water supply _____ Public _____ Private

Provide:

Copy of Tax Map w/ prop highlighted _____

Safety / Egress Plan _____

Layout of Property/ Site Plan _____

Parking Plan _____

Plan for Garbage removal _____

Potable Water Test (if private) _____

Copy of Ulster County Cert. of Authority _____

Notarized Affidavit & affirmation of local law _____

Short Term Rental Fee Schedule:

1. Application Filing Fee of \$50.00
(Due with permit application)

2. Annual Operating Fee
(DO NOT submit with permit application)
\$50.00 for first bedroom plus
\$25.00 for each additional bedroom
\$250.00 for non-owner occupied

I give B.D. permission to inspect my property _____
Signature of Owner _____ Date _____

OFFICE USE:

Permit Fee: _____

STR Permit #: _____

SUP if required: _____

Paid Check #: _____

Zoning District: _____

Open Permits or Violations: _____

AFFIDAVIT

I/We _____ are the owner(s) of the
property at _____

(street location)

In the Town of Woodstock.

I / We hereby swear that I/We have read the Short Term Rental law provided, and understand my obligations as the
property owner.

(owner) (date)

(owner) (date)

State of New York

County of _____

Subscribed to and sworn to (or affirmed) before me this _____ day of _____ year _____

by (print signer's name) _____

Notary Public