ONOTA TOWNSHIP
Alger County, Michigan
PO Box 100, Deerton, MI 49822 | (906) 343-6535 | onotatwp@tds.net

SHORT-TERM RENTAL REGISTRATION APPLICATION

Annual registration is required before a dwelling is advertised or operated as a Short-Term Rental.

☐ Initial ☐ Renewal	**Registration year:** _____	**Township file no.:** _____

1. SHORT-TERM RENTAL PROPERTY

Property street address: _____	**City / ZIP:** _____
Tax parcel identification no.: _____	* **Zoning district:** ☐ TD ☐ TP
If TP, conditional use permit obtained? ☐ Yes ☐ No	☐ Entire dwelling ☐ Habitable accessory space
Name used in rental advertisement (if any): _____	**Date operation is proposed to begin:** _____

* **Zoning note:** Short-Term Rentals are a permitted principal use in the TD District and a conditional use in the TP District. Any separate zoning approval required by the Zoning Ordinance must be obtained.

2. PROPERTY OWNER

Owner full legal name: _____	**Business/entity name (if applicable):** _____
Mailing address: _____	**City / State / ZIP:** _____
Telephone: _____	**Email:** _____

3. DESIGNATED LOCAL CONTACT

The local contact must be available 24 hours a day, 7 days a week; be able to physically respond within 45 to 60 minutes; and have authority to resolve noise, parking, safety, and nuisance issues.

☐ Owner is local contact	☐ Different local contact listed below
Local contact full name: _____	**Business/entity (if applicable):** _____
Physical / mailing address: _____	**City / State / ZIP:** _____
24-hour telephone: _____	**Email:** _____

4. OCCUPANCY AND SLEEPING ROOMS

Maximum occupancy is two persons per qualifying bedroom plus two additional persons per dwelling unit. Children age five and under do not count toward occupancy. Each bedroom must contain at least 80 square feet and meet applicable building, safety, and egress requirements.

Qualifying bedrooms: _____	**Calculated maximum occupancy:** _____	**Septic design capacity:** _____
☐ Private septic ☐ Public/other	**Bedroom 1 sq. ft.:** _____	**Bedroom 2 sq. ft.:** _____
Bedroom 3 sq. ft.: _____	**Bedroom 4 sq. ft.:** _____	**Other description:** _____

If additional space is needed to list bedrooms and square footage, attach a separate, clearly legible sheet.

5. PARKING INFORMATION

Provide the dimensions and layout of all Short-Term Rental parking. Complete the parking plan below or attach a separate, legible plan.

Number of parking spaces: _____	**Typical space dimensions:** _____	**Driveway width:** _____
☐ On-site ☐ Shared/access easement	☐ Plan drawn below ☐ Plan attached	**Surface type:** _____

PARKING PLAN - Show property lines, dwelling, driveway/access, parking-space dimensions, road name, and north arrow.

N ↑

6. APPLICATION ATTACHMENTS

☐ Parking plan included	☐ $500 annual registration fee included
☐ Conditional-use approval attached, if applicable	

Mail the completed application and $500 registration fee to:

Onota Township
Attn: Township Clerk
P.O. Box 100
Deerton, MI 49822

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7. OWNER CERTIFICATION AND AUTHORIZATION

- I certify that the information submitted with this application is true and complete to the best of my knowledge.
- I understand that an approved annual registration is required before the dwelling may be advertised or operated as a Short-Term Rental.
- I authorize the Township or its designated qualified inspector to enter the Short-Term Rental at a mutually arranged time to conduct the inspections required by the ordinance.
- I understand that the Township-approved Good Neighbor Guide, emergency contact information, and local contact information must be posted conspicuously within the dwelling.
- I understand that the owner and operator are jointly and severally responsible for compliance with the Short-Term Rental ordinance and other applicable laws.

Owner / authorized representative signature: _____	**Date:** _____
Printed name: _____	**Title / authority (if entity-owned):** _____

8. TOWNSHIP SAFETY INSPECTION RECORD - TOWNSHIP USE ONLY

Inspection confirms observable compliance with the ordinance inspection items. It does not create a Township duty to discover, correct, or warn of defects or dangers.

#	Inspection item	Finding
1	Smoke detectors in proper working order	Pass ☐ Fail ☐ N/A ☐
2	Carbon monoxide detectors in proper working order	Pass ☐ Fail ☐ N/A ☐
3	Required ingress and emergency egress are present and unobstructed	Pass ☐ Fail ☐ N/A ☐
4	Fire extinguishers properly charged, mounted, and accessible	Pass ☐ Fail ☐ N/A ☐
5	Evacuation map posted	Pass ☐ Fail ☐ N/A ☐
6	Septic capacity sufficient for maximum permitted occupancy	Pass ☐ Fail ☐ N/A ☐
7	Good Neighbor Guide on Hand	Pass ☐ Fail ☐ N/A ☐

Deficiencies / corrective action required: _____

_____

☐ Initial inspection ☐ Re-inspection	**Inspection date:** _____	**Inspection count this year:** _____
☐ Pass ☐ Fail ☐ Conditional follow-up	**Inspector name:** _____	**Inspector signature:** _____

9. REGISTRATION DECISION - TOWNSHIP USE ONLY

☐ Approved ☐ Denied ☐ Incomplete	**Registration no.:** _____
Effective date: _____	**Expiration date:** _____
Authorized Township official: _____	**Signature / date:** _____

Township comments / conditions: _____