



CITY OF NEWPORT BEACH
 REVENUE DIVISION
 100 CIVIC CENTER DR • P.O. BOX 1768
 NEWPORT BEACH, CA 92658-8915
 (949) 644-3141
 RevenueHelp@newportbeachca.gov

OFFICE USE ONLY

BUSINESS NUMBER

UTOT LICENSE NO

**SHORT TERM LODGING PERMIT APPLICATION
 TRANSIENT OCCUPANCY TAX REGISTRATION**

\$93.00 Fee. Make checks payable to the City of Newport Beach

Non-Refundable – Please allow 7-10 working days for processing.

ZONE _____

START DATE _____

Please list the address of each dwelling unit and fill out additional applications for each building you rent on a short term basis. **Note: you must be registered for Business License Tax before you engage in short term property rentals.** In the event of an emergency, the information you provide below will be used to expedite police and fire response and to contact you.

PROPERTY OWNER INFORMATION

Owner Name _____
 Maximum 30 characters
Mailing Address _____ Suite _____
 City: _____ State: _____ Zip: _____ Email: _____
Phone (____) _____ **Emergency Phone** (____) _____
 Must be available 24 hours a day and 7 days a week

SHORT TERM RENTAL PROPERTY INFORMATION

Building Address _____
Unit Addresses (eg. 1234 Main Street #A; 5678 1/2 Elm St; etc.) – if leasing more than one unit.
 Please list your designation for each unit you rent in the structure listed above and the maximum number of overnight occupants you have authorized for each unit

Unit 1 _____	Maximum Occupants _____	Unit 3 _____	Maximum Occupants _____
Unit 2 _____	Maximum Occupants _____	Unit 4 _____	Maximum Occupants _____

AGENT INFORMATION

If the property is represented by an agent(s) or rental company(s), and will be collecting the Transient Occupancy Tax on behalf of the owner, please complete the information below:

Rental Company or Agent Name _____
Business Address _____ Suite _____
 City: _____ State: _____ Zip: _____
Business Phone (____) _____

My property is represented by more than one agent. List additional agents on a separate sheet of paper.

I hereby certify under the penalty of perjury that I am authorized to make this statement and the information provided on this application is true and correct.

I have read and understand the conditions provided. (Permit will not be processed unless this box is checked).

Owner's Signature _____ **Date** _____

To learn more about Short Term Lodging Permits, please see the Permits Conditions handout at: <http://www.newportbeachca.gov/government/departments/finance/revenue-division/short-term-rentals/remember-these-rules>

Newport Beach Municipal Code 5.95.020 Permit Required.

No owner of a lodging unit located within a residential district shall rent that unit for a short term without a valid short term lodging permit (permit for that unit issued pursuant to this chapter. No permit shall be issued subsequent to June 1, 2004 to any dwelling unit on any parcel zoned for "Single-family Residential (R-1)" or is designated for single-family residential use as part of a Planned Community Development Plan, Specific Area Plan or Planned Residential District unless a permit has previously been issued for that dwelling unit and was not subsequently revoked. (Ord. 2004-6 § 1, 2004: Ord. 92-13 § 3 (part), 1992)