

**SHORT-TERM RENTAL PERMIT  
RENEWAL APPLICATION**

1/04/2024

Jackson Township, Monroe County, PA

Ordinance 2018-100- Amended Ordinance 2023-100: adopted 1/23/2023

**ALL APPLICATIONS MUST BE SUBMITTED AS COMPLETE  
(APPLICATION, FEE AND SUPPORTING DOCUMENTATION)**

**Rental Property Address**

Application Fee:  
\$750 \*\*  
(non-refundable)

\_\_\_\_\_  
\_\_\_\_\_

CURRENT PERMIT # \_\_\_\_\_  
EXPIRATION DATE \_\_\_\_\_

**Property Owner**

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_

Alt. Phone \_\_\_\_\_

Email \_\_\_\_\_

\*\* Inspection of premises - every 2 yrs. -  
Inspection Fee of \$100 for each necessary  
inspection - to be paid prior to inspection

24/7 contact     text OK

24/7 contact     text OK

**Managing Agency, Agent or Local Contact Person (Required -Local contact within 20 miles)**

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_

Alt. Phone \_\_\_\_\_

24/7 contact     text OK

24/7 contact     text OK

Email: \_\_\_\_\_ Security Company\*: \_\_\_\_\_ Phone #: \_\_\_\_\_

\*IF PROPERTY IS SERVED BY A THIRD-PARTY SECURITY SERVICE, ALARM COMPANY INFORMATION IS REQUIRED\*

**I/We Hereby Certify to the Following: (all boxes **must** be checked)**

A minimum of \$500,000 liability insurance coverage is maintained to cover the commercial use of the short-term rental. (Attach copy of declaration page)

All safety devices including smoke detectors, CO2 detectors and fire extinguisher are installed and in working order.

There have been no interior alterations affecting the number of bedrooms. **Number of bedrooms:** \_\_\_\_\_

Verification all owed hotel and sales taxes have been paid (Airbnb/Vrbo transaction report for past year & County reports)

Septic Tank Certification (as applicable, every year), Septic Tank Pumping Record (as applicable, every three years)

**Attached Documents: (ALL DOCUMENTS & APPLICATION TO BE RECEIVED BY TOWNSHIP 3 WEEKS PRIOR TO EXPIRATION DATE FOR PROCESSING IN ONE PACKET)**

I/We hereby certify that the above information is true and correct. I further understand that any false information is subject to enforcement as provided in Jackson Township Ordinance 2018-100.

Owner Signature \_\_\_\_\_

Date \_\_\_\_\_

Managing Agency/Agent/Local Contact Person \_\_\_\_\_

Date \_\_\_\_\_

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