

HOW TO APPLY FOR A SHORT-TERM RENTAL UNIT PERMIT

- Obtain permit application. Start by reviewing the materials in this packet or by printing all relevant forms at [web address]. You may also call (865) 215-2083 or visit the Business License & Tax Office in the City County Building, 400 Main Street, Fourth Floor.
- **2.** Complete the application packet. The application has several key components. A complete checklist can be found on Page 2.
 - Short Term Rental Unit Permit Operator Application
 - Permit fee payable to City of Knoxville; the City accepts check, cash, Visa, Discover, American Express, and Mastercard
 - A City and County Business License, available for a fee of \$15 each
 - Completed Life Safety Compliance
 Verification Form
- 3. Make copies of all forms for your records.
- 4. Submit all forms together as a complete packet. Incomplete packets will be returned to the applicant via mail. Mail or deliver your completed application packet to:

Knoxville Business License & Tax Office c/o Short Term Rental Unit Permit Program 400 Main Street, Suite 445 (in person) P. O. Box 1028 (by mail) Knoxville, TN 37901-1028

- 5. Send a Neighborhood Notification form to all adjacent neighbors and neighborhood organization for Type 1 Permits.
- A copy of the Short Term Rental Unit Permit will be mailed to you and is valid for one year, unless revoked.

WHAT IS A SHORT TERM RENTAL UNIT?

Short-term rentals are properties that are listed and booked through a Hosting Platform for consideration and for less than 30 days at a time.



Restrictions and availability of permits varies by zoning district category. For more information, see City of Knoxville Ordinances
No. O-245-2017 and O-284-2017.

Property owners should review their HOA covenants for any restrictions.

If you have questions, please contact the Business License & Tax Office at (865) 215-2083.



SHORT TERM RENTAL UNIT PERMIT OPERATOR APPLICATION

| This | s is an Application for: | | | |
|------|---|--|--|--|
| | ☐ Type 1 Operating Permit, Owner Occupied ☐ Type 2 Operating Permit, Non-Owner Occupied | , | | |
| 1. | Location of proposed Short Term Rental Unit | ("STRU"): | | |
| | Address | Zip | | |
| | Zoning District ¹ | | | |
| 2. | What is the Operator's relationship to the STRU? Check all that apply. | | | |
| | ☐ Owner ☐ Resident ☐ Lessee ☐ | Other—Please Describe | | |
| 3. | What type of dwelling is the STRU? | | | |
| | ☐ Single Family Home ☐ Duplex or Townh | ☐ Single Family Home ☐ Duplex or Townhouse ☐ Garage Apartment ☐ Condominium | | |
| | ☐ Apartment in Apartment Building ☐ Carriage House ☐ Other—Please Describe | | | |
| 4. | Name of Operator | Name of Operator | | |
| | | Zip | | |
| | Phone () Em | ail address | | |
| | | rovide below the name, address, email address, and phone attach proof that the entity is in good standing with the | | |
| | Name | Address | | |
| | Zip Email address | Phone () | | |
| 5. | If Operator is not the Owner of the proper | ty, provide below the name, address, email address, and | | |
| | phone number of the Owner of property. | | | |
| | Name of Owner | Address | | |
| | Zip Phone () | Email address | | |

¹ You can find the zoning district for the Short Term Rental Unit ("STRU") by visiting <u>www.kgis.org/KGISMaps/</u>. Click on the "Maps" tab at the top left, and then click on the "Planning and Zoning Maps" button to expand the options. Choose the "Zoning" button, which will show the color-coded zoning map and district designation (e.g., R-1, C-2).

² To demonstrate good standing, attach the printer friendly version of the filing information, which can be accessed online at https://tnbear.tn.gov/Ecommerce/FilingSearch.aspx.

| Nam | ne | Address |
|-------|--|--|
| Zip _ | Email address | Phone () |
| Alte | rnate Phone () | Alternate Phone () |
| ATT | ACHMENTS | |
| | | |
| | Proof of ownership of the STRU ³ | |
| | • | ments demonstrating proof of residency of the Owner ⁴ |
| | • | |
| | For a Type 1 Permit, two (2) docu | ed in this packet) |
| | For a Type 1 Permit, two (2) docu Site plan (using the forms provide | ed in this packet) e (enclosed in this packet) |
| | For a Type 1 Permit, two (2) docu Site plan (using the forms provide Affidavit of Life Safety Complianc A City and County Business Licens | e (enclosed in this packet) |

³ Must be in the form of a recorded deed.

⁴ As listed in the ordinance, the acceptable documents to establish residency are: the owner's motor vehicle registration, a valid driver's license or TN identification card, proof of the owner's children's school registration, the owner's voter registration card, and the owner's W-2 mailing. Staff may request additional documentation. Once these documents are submitted to the City of Knoxville, they become public records; please redact any information that you do not want to be a public record.

⁵ Application for City Business Tax License is available here:



SHORT TERM RENTAL UNIT PERMIT OPERATOR APPLICATION

By signing below:

I ACKNOWLEDGE THAT I HAVE READ AND WILL FOLLOW AND COMPLY WITH ALL SHORT TERM RENTAL UNIT REGULATIONS AND ORDINANCES, THE CITY'S BUSINESS LICENSE REQUIREMENTS, THE CITY'S OCCUPANCY PRIVILEGE TAX REQUIREMENTS, AND ANY ADDITIONAL ADMINISTRATIVE REGULATIONS IMPOSED NOW OR LATER. IF I AM AN OWNER, BUT NOT THE OPERATOR, I ACKNOWLEDGE THAT I CAN BE HELD LEGALLY RESPONSIBLE AND LIABLE FOR COMPLIANCE WITH CITY OF KNOXVILLE ORDINANCES AT THE SHORT TERM RENTAL UNIT.

I SHALL DEFEND, INDEMNIFY, AND HOLD HARMLESS THE CITY OF KNOXVILLE AND ITS OFFICERS, REPRESENTATIVES, AND EMPLOYEES FOR ANY AND ALL MATTERS RELATED TO THIS AND THE OPERATION OF THE SHORT TERM RENTAL UNIT. THE INDEMNIFICATION AND HOLD HARMLESS PROVISIONS STATED HERE SHALL SURVIVE REVOCATION OR EXPIRATION OF THE PERMIT.

I ACKNOWLEDGE THAT THIS AFFIDAVIT IS A "GOVERNMENTAL RECORD" AND IF I MAKE A FALSE ENTRY OR REPRESENTATION IN THIS AFFIDAVIT, THEN I COMMIT A VIOLATION OF TENNESSEE CODE ANNOTATED SECTION 39-16-504. I HAVE CAREFULLY CONSIDERED THE CONTENTS OF THIS AFFIDAVIT BEFORE SIGNING. I AFFIRM THAT THE CONTENTS ARE TRUE, TO THE BEST OF MY KNOWLEDGE.

| OPERATOR/APPLICANT | · |
|-----------------------------------|---------------|
| | Signature |
| | Print Name |
| | Date |
| OWNER (IF NOT OPERATOR/APPLICANT) | Signature |
| | Print Name |
| | Date |

VERIFICATION FORM

The Operator must certify compliance by signing below. All fields are required.

Verification of number and locations are required for the entire property, even those areas or rooms that are not available for Occupancy as part of the Short Term Rental Unit. Every smoke and carbon monoxide alarm must function properly with the alarm sounding after pushing the test button. Smoke alarms must meet Underwriters Laboratory (UL) 217 standards and must be installed inside sleeping rooms, outside sleeping rooms in the immediate vicinity of bedrooms, and on each story, including basements. Carbon monoxide alarms must be within 15 feet of the door of all bedrooms. There must be at least one (1) fire extinguisher in the Short Term Rental Unit.

Number and location(s) of smoke alarms:

| Number and location(s) of carbon monox | ide alarms: |
|---|--|
| Number and location(s) of fire extinguish | ers: |
| EQUIPMENT NOTED ABOVE IS FULLY OPE | HE CONTENTS OF THIS FORM ARE TRUE AND THAT THE ERATIONAL. I ACKNOWLEDGE THAT THE CITY RESERVES THE OPERATION OF THE EQUIPMENT BY INSPECTION. |
| OPERATOR/APPLICANT | Signature |
| | Print Name |
| | Date |

SITE PLAN INFORMATION: OVERVIEW

| ADDRESS |
|---------|
|---------|

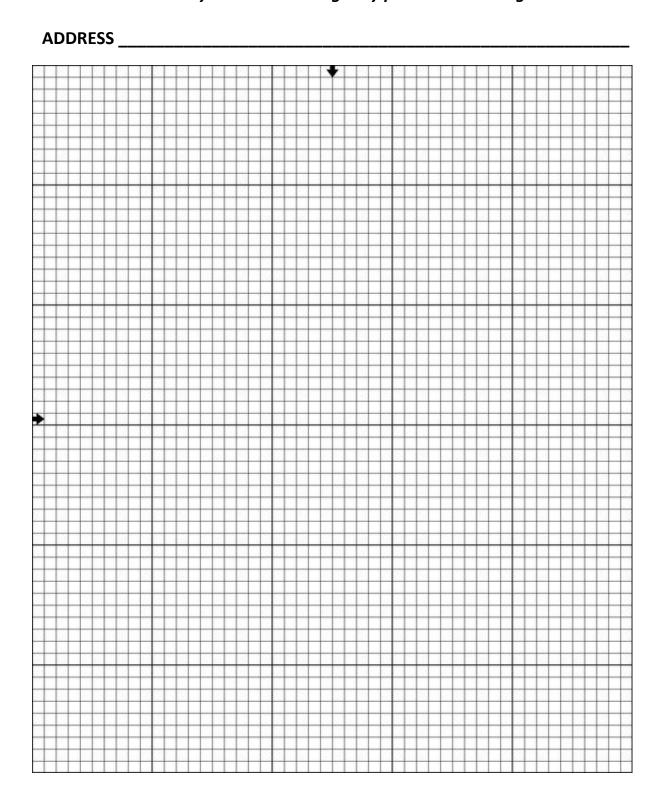
| Square Footage of the STRU |
|---|
| Number of Bedrooms in STRU |
| Number of Bathrooms in STRU |
| Number of Bedrooms Listed on Hosting Platform |
| Number of Floors with Habitable Space |
| Number of Doors Exiting to Exterior |
| Number of Vehicles Accommodated by Driveway |



SITE PLAN INFORMATION: FLOOR PLAN

Please draw a floor plan of the STRU below and illustrate where Transients will park.

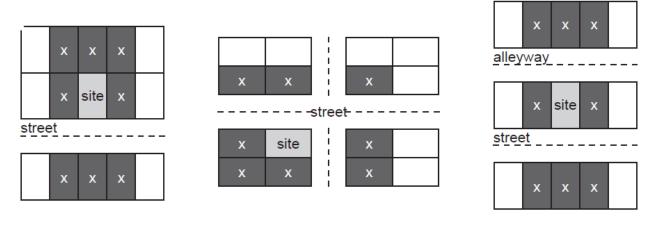
You may also attach a digitally produced drawing.



Neighborhood Notice Short Term Rental Unit Permit

Hello Neighbors, Neighborhood Representatives, and Property Owners! The City of Knoxville's Code of Ordinances at Chapter 16 allows me to rent up my property to overnight guests on a short-term basis (less than 30 days).

You are receiving this notice because, as part of the permit application, I am required to mail or deliver this notice to the neighborhood association in the area where my home is located and all property owners with properties abutting, directly and diagonally across the street from my residence. See figures below for permit notice area.



Below is a brief description of my short-term rental—including number of bedrooms to be rented and where my guests will be parking. I have also included relevant information you might find useful such as how my guests will be accessing my residence.

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Address of the Short Term Rental Unit: | | | | | |
| Name of Owner-Occupant: | | | | | |
| Phone Number for Owner-Occupant: | | | | | |

This notice is provided as a courtesy so neighborhood representatives and adjacent neighbors are aware of this activity happening in their neighborhood. For your convenience, a Short Term Rental Hotline, (865)823-2633 has been established for your questions and concerns. You may also contact the City of Knoxville Business Tax Office at (865) 215-2083, or strs@knoxvilletn.gov, or in person at the City-County Building at 400 Main Street, Suite 450 in Downtown Knoxville.