



BOROUGH OF NEW HOPE

123 New Street, New Hope, PA 18938 ● Phone 215-862-3347 ● info@NewHopeBorough.org

SHORT-TERM RENTAL PERMIT APPLICATION

**If the Dwelling has multiple Dwelling Units to be used as Short-Term Rentals,
a separate fee will be required for each Dwelling Unit.**

Application Date: _____

Property Address: _____

Permit Number: _____

Property Owner

Property Owner Name _____

Property Owner Address _____

City _____ State _____ Zip _____

Phone _____ 24-Hour Phone _____

Email _____

Person In Charge / Alternate Contact (if owner located over 20 miles from subject property)

Name Person In Charge _____

Address _____

City _____ State _____ Zip _____

24-Hour Phone _____

Email _____

PROPERTY INFORMATION

Structure Type	_____ Single	# guests during any duration	
	_____ Multi-Unit _____ # of Units	# Dwelling Units to be used as a Short Term Rental	
Sewer System	_____ Public _____ Private	If private, date of last tank pump:	

Single or Multi Unit #	# of Bedrooms	Maximum Overnight Occupants ** (not to exceed 10)	Maximum Occupancy **	# of parking spots

***Borough to complete shaded areas above*

CHECKLIST OF DOCUMENTS TO BE SUBMITTED WITH THIS APPLICATION

	Diagram or photograph showing location and number of on-site parking spaces
	For PRIVATE SEPTIC – Proof tank was pumped within the past three (3) years for approval by Bucks County Health Dept. Maximum occupancy shall be limited by the capacity of the sewage disposal system. <i>If applicable.</i>
	Copy of property owner’s current Bucks County Lodging Room Rental Tax Certificate of Authorization
	Copy of property owner’s current Pennsylvania Sales and Use Tax Permit
	Trespass Waiver signed by property owner
	Copy of current recorded Deed for the subject property
	Certificate of Insurance confirming at least \$500,000 in property and casualty, general liability or like-kind risk insurance per Dwelling Unit to be used as a Short-Term Rental for the full duration of the Short-Term Rental Permit term, including proof that the property owner has notified the insurer of the intended Short Term Rental Use and that the insurance policy includes Short Term Rental or like coverage.
	Written Notice to Homeowners or Condominium Association, if applicable, indicating the intent to submit an application for a Short Term Rental Permit, when required by the Association’s by-laws, rules and/or regulations or like agreement.
	Confirmation the property owner will expressly reference the Short Term Rental Ordinance, Borough Ordinance No. 22-03 and attach a copy of the short term ordinance to any lease agreement, lease, contract or other writing, entered into by the property owner and the renter(s) of the Short Term Rental and to provide the renter and all overnight occupants all necessary 24 hour contact information.

Short Term Rental Fees are payable to New Hope Borough upon the filing of a Short-Term Rental Permit Application and upon renewal of any Short-Term Rental Permit. The amount of the rental fee can be found on the Borough’s Fee Schedule, located on the Borough website.

Short Term Rental Permits are valid for a period not to exceed 1 year from the date of issuance and must be renewed annually, including the property owner’s resubmission of all documents identified in the above checklist.

The Applicant must provide verification that all county and state rental, sales and use taxes have been paid before a Short-Term Rental Permit renewal is granted.

Short Term Rental Permit applications and subsequent renewals shall require inspections of the Dwelling and the Dwelling Unit(s) to be used as a Short-Term Rental, as each of those terms are defined in the Short-Term Rental Ordinance, by the Borough’s Code Enforcement Officer or his/her designee.

Annual Fire Inspections are to be applied for separately with New Hope Borough.

By signing this application, the property owner acknowledges receipt, review and understanding of, and agreement to comply with, the Short-Term Rental Ordinance and that any violation thereof may subject the property owner and/or the property owner’s short-term renter(s) and/or guest(s) to all penalties set forth in the Short-Term Rental Ordinance.

 Property Owner

 Person in Charge (if applicable)

 Date

**NEW HOPE BOROUGH,
BUCKS COUNTY, PENNSYLVANIA
SHORT TERM RENTAL TRESPASS WAIVER**

To: New Hope Borough, Office of Code Enforcement

The Undersigned is(are) the owner(s) of the parcel of land located at _____, New Hope Borough, Bucks County, Pennsylvania, Tax Map Parcel No. _____ (“land”), which is occupied by a **Dwelling** containing _____ (#units) **Dwelling Unit(s)** intended for **Short Term Rental Use**, as those terms are expressly defined in the Borough’s Short Term Rental Ordinance (“Ordinance”) and herein referenced below.

The Undersigned authorize(s), allow(s), and grants the right(s) to, any Borough **Code Enforcement Official** (and/or his/her designee(s)) as the term is defined in the Ordinance, to enter upon the land, **Dwelling** and **Dwelling Unit(s)**, to conduct inspections, issue violation notices or summonses, to enforce compliance with the Ordinance and the Zoning Ordinance, to investigate and/or inspect complaints and possible unsafe conditions, and to otherwise implement and carry out the provisions of the Ordinance and the Zoning Ordinance; and for such other reasons as may be allowed by law (“Ordinance Action”).

By signing below, the undersigned agree(s) that no Ordinance Action shall be deemed a trespass upon the land, **Dwelling** or **Dwelling Unit**, and hereby waives any argument, claim, or allegation of trespass.

By signing this Trespass Waiver, the Undersigned re-acknowledges receipt, review and understanding of, and agreement to comply with, the Ordinance, and that any violation thereof may subject the Undersigned and/or the Undersigned’s(s’) short-term renter(s) and/or guest(s) to all penalties set forth in the Ordinance.

The Undersigned(s) has (have) signed this Waiver this _____ day of _____, 20____ intending to be legally bound.

Property Owner Signature

Print Name _____

Address _____

City, State, Zip _____

Telephone (24Hrs) _____

Property Owner Signature

Print Name _____

Address _____

City, State, Zip _____

Telephone 24Hrs _____