

AFFIDAVIT

The signer(s) of this form does hereby state, warrant, certify and affirm the following:

- 1) Each dwelling unit will have an operating smoke detector in each bedroom and an operating carbon monoxide detector on each floor. These appliances will be maintained every ninety (90) days at a minimum.
- 2) I have liability coverage for the property (\$1,000,000 required)
- 3) I have provided a copy of the lease used to lease the dwelling with this registration form
- 4) If the dwelling is not serviced by public sewer, I will have a "Home loan evaluation-septic only inspection" by the Van Buren County Health Department and provide a certificate showing a successful outcome, before it is renter occupied.
- 5) I consent to inspections of the dwelling unit by the township and will make the dwelling unit available for inspections upon request.
- 6) I will provide renters with a copy of the township's Good Neighbor Policy and the Short-Term Rental Ordinance.
- 7) I will follow all other requirements of the Short Term Rental Ordinance #157
- 8) This registration form is accurate and complete.

Owner's Signature _____

Date _____

By signing above, the owner/agent of the dwelling unit certifies that the above statements are true. Statements found to be falsified on this application and affidavit will be grounds to revoke the rental permit.

Please submit completed form and Affidavit with \$325 registration fee to the address below:

South Haven Charter Township
Attn: Clerk
09761 Blue Star Highway
South Haven, MI 49090

NOTICE: The issuance of a certificate of registration shall in no way impact the zoning of the subject property, and shall not prevent the Township from enforcing Zoning Ordinance regulations and limitations on said property, or any other applicable code of the township.