



# CITY OF FOLEY, AL SHORT TERM RENTAL BUSINESS LICENSE APPLICATION

The City Does Impose the Short Term Rental Tax in the Police Jurisdiction

Complete and Mail or Fax To:
<b>CITY OF FOLEY</b> <b>PO BOX 1750</b> <b>FOLEY, AL 36536</b> Phone: (251)943-1545 Fax: (251)952-4014 Email: revenue@cityoffoley.org

<b>Box for Municipal Use Only</b>	
Permit# _____	Business License# _____
Amount Paid: \$ _____	Recpt#: _____
Received By: _____	Fire Dept Approval: Y / N
Ck#: _____	Date: _____
Physical Location: City _____	PJ _____

Please Print or Type

**Application Type:** New \_\_\_\_\_ Owner Change \_\_\_\_\_ Name Change \_\_\_\_\_ Location Change \_\_\_\_\_

Owner Name: \_\_\_\_\_

Property Mgr Name: \_\_\_\_\_ Cell: \_\_\_\_\_

Mailing Address of Owner: \_\_\_\_\_

Telephone: (Business): \_\_\_\_\_ Cell: \_\_\_\_\_ Home: \_\_\_\_\_

Physical Address of Unit: \_\_\_\_\_

Physical Address of Unit: \_\_\_\_\_

Physical Address of Unit: \_\_\_\_\_

Physical Address of Unit: \_\_\_\_\_

Physical Address of Unit: \_\_\_\_\_

24 Hour Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

List of ALL Hosting Platforms: \_\_\_\_\_

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

Do you plan to allow weddings, parties, banquets, etc. at this rental location? \_\_\_\_\_

If yes, square footage of location \_\_\_\_\_ If yes, acreage of property \_\_\_\_\_

Date your Activity Initiated in Foley: \_\_\_\_\_ Number of Rentals \_\_\_\_\_

***This application has been examined by me and is, to the best of my knowledge, a true and complete representation of the above named entity, and person(s) listed. I understand that my permit may be revoked for any false statements made herein.***

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Print Name: \_\_\_\_\_