



**Planning and Zoning Division**  
**VACATION RENTAL LICENSE**  
**Registration Form**

(Properties zoned RS-5, RS-6 and RS-7, rented for less than 30 days or 1 calendar month.)

Submittal Date: \_\_\_\_\_

**City Ordinance No. 2016-02, Chapter 7, Section 7-465 to 7-484 (ATTACHED)**

**REGISTRATION CHECKLIST:**

- Completed application, notarized, and signed by property owner, property manager or authorized agent\*.
- Proof of payment (fees).
- DBPR Transient Public Lodging Establishment license.
- Current and active Certificate of Registration with Florida Department of Revenue.
- Evidence of Vacation Rental's Current and active account with Broward County Tax Collector.
- Current Certificate of Occupancy for the subject vacation rental building.
- Current Local Business Tax Receipt.
- Interior building sketch, by floor.
- Sketch showing the number and location of parking spaces for the subject vacation rental.
- Sample of Posting Notice.

\*Authorized agents must provide proof of authorization from property owner. Incomplete applications will not be accepted.

- New**
                         
  **Re-Instatement**
                         
  **Renewal**

**VACATION RENTAL FEE SCHEDULE**

Vacation Rental Registration Application	\$200.00
Vacation Rental Annual Registration Renewal Application	\$150.00
Vacation Rental Re-Instatement After Suspension Fee	\$100.00
Vacation Registration Modification	\$100.00
Vacation Rental Appeal	\$200.00
Vacation Rental Penalty Fee for First Offense	\$250.00
Vacation Rental Penalty Fee for Second (and more) Offenses	\$500.00
** Processing fees of \$45.00 may be added to any Planning and Zoning Fee	

**RENTAL PROPERTY**

Rental property address:  
 \_\_\_\_\_  
 Hallandale Beach, FL 33009

Gross square footage: \_\_\_\_\_ # of bedrooms: \_\_\_\_\_ # of bathrooms: \_\_\_\_\_

Maximum occupancy: \_\_\_\_\_ # of parking spaces provided: \_\_\_\_\_

Please acknowledge that each guest room shall be equipped with an approved listed single-station smoke detector meeting the minimum requirements of the National Fire Protection Association (NFPA).

Please acknowledge that minimum safety and operational requirements are in compliance with Section 7-476.

**PROPERTY OWNER'S INFORMATION**

Owner's name: \_\_\_\_\_

Permanent mailing address: \_\_\_\_\_

City, State and Zip: \_\_\_\_\_



# VACATION RENTAL LICENSE Registration Form

Home Phone:	Cell Phone:
Business Phone:	
Email:	

### PROPERTY MANAGER'S INFORMATION

Manager's name:	
Mailing address:	
City, State and Zip:	
Home Phone:	Cell Phone:
Business Phone:	
Email:	

### 24/7 LOCAL RENTAL AGENT'S INFORMATION Property Owner Property Manager

Agent's name:	
Address:	
City, State and Zip:	
Home Phone:	Cell Phone:
Business Phone:	
Email:	

**Applicant Affidavit of Agreement:**

By signing this agreement, I, the Property Owner, Property Manager or Authorized Agent, agree to use my best efforts to assure that the vacation rental use of the dwelling will not disrupt the residential character of the neighborhood, and will not interfere with the rights of neighboring property owners to the quiet enjoyment of their residences. Furthermore, acknowledge that I was provided a copy of the City of Hallandale Beach Ordinance No. 2015-02, Chapter 7, Sections 7-465 to 7-484 for Vacation Rental Licenses.

I acknowledge that I have carefully reviewed this application and all information contained herein has been freely and voluntarily provided. All facts, figures and statements contained herein are true, correct and complete to the best of my knowledge and belief. I also acknowledge and understand that providing any false or misleading information on this application may result in the denial or the revocation thereof, of any license or permit issued by the City of Hallandale Beach which was based upon information provided in this application.

Name of applicant		Title	
Signature			

Sworn to and subscribed before me at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_.

(SEAL)

Personally know \_\_\_\_\_  
or produced ID \_\_\_\_\_  
Type of ID produced \_\_\_\_\_

\_\_\_\_\_  
Notary Public