



"A Great Place to Call Home"

LACKAWAXEN TOWNSHIP, PIKE COUNTY P.A.

Lackawaxen Township
169 Urban Road
Hawley, PA 18428

Phone: 570-685-7288
Fax: 570-685-2550
Email: town@ptd.net

Zoning/Septic/Bldg: 570-685-2990
Road Department: 570-685-3200

SHORT-TERM RENTAL RENEWAL APPLICATION

Application fee is \$50.00

RENTAL PROPERTY INFORMATION

911 Address _____ Tax Map ID # _____

Pike County Hotel Excise Tax Number _____

Pa Department of Revenue Sales Tax Number _____

Insurance Company Name _____ Policy Number _____

Issue Date _____ Expiration Date _____

OWNER INFORMATION

Property Owners Name _____

Mailing Address _____

Phone Number _____ Cell Phone _____

Email Address _____

LOCAL CONTACT PERSON(S)/ MARKETING AGENT

Print Name(s) _____

24 Hour Phone Number(s) Home Phone _____ Cell Phone _____

Mailing address _____

Print Name(s) _____

24 Hour Phone Number(s) Home Phone _____ Cell Phone _____

Mailing address _____

Print Name(s) _____

24 Hour Phone Number(s) Home Phone _____ Cell Phone _____

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SHORT-TERM RENTAL SAFETY CHECKLIST

911 Address _____ Owner Name _____

Number of Bedrooms _____ (must equal original application)

Advertised number of people the house can sleep _____

- 1 Yes () No () UL listed smoke detectors are installed in each sleeping room, outside each sleeping area, on each story including basements and habitable attics and are working properly and tested regularly.
- 2 Yes () No () UL listed Carbon Monoxide detectors are installed in the immediate vicinity of any sleeping rooms (if the dwelling unit contains an attached garage or fuel burning). If a fuel appliance is located within a sleeping room, the room shall have a CO Detector installed.
- 3 Yes () No () All interior/exterior stairs and decks are structurally sound, and all guardrails and handrails are sound and in good condition.
- 4 Yes () No () A fully charged fire extinguisher is located in a conspicuous area within the kitchen.
- 5 Yes () No () GFCI protected outlets are present for any outlet located within (6) six feet of a water source.
- 6 Yes () No () All sleeping rooms have one properly operating emergency escape window or door. Windows should have at least 5.7 sq. ft. or clear opening (5 sq. ft. for ground floors)
- 7 Yes () No () Any new Zoning or Building permits issued to this location during 2022, if so what type of permit _____
- 8 Yes () No () The dwelling Unit has a Township compliant 911 sign in place.

[] I, hereby certify that the items checked above are correct and that the Short-Term Unit is free from any apparent safety hazards. I, also acknowledge, that as the owner, it is my responsibility to maintain safe conditions on the subject property.

Owner Signature _____

On this, the _____ day of _____, 20____ before me a notary public, the undersigned officer, personally appeared _____ know to me (or satisfactorily proven) to be the person whose name subscribed to the within instrument, and acknowledged that she/he executed the same for the purposes therein contained in witness whereof, I hereunto set my hand an official seal.

NOTARY PUBLIC _____