## **BARRETT TOWNSHIP SUPERVISORS**

Phone: 570-595-2602



Fax: 570-595-7550

## 993 ROUTE 390 • CRESCO, PA 18326

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## **SHORT-TERM RENTAL RENEWAL PERMIT**

Rental Property Address			Application Fee: \$300 (non-refundable)	
Dranariu Oumar				
Property Owner				
Name		Phone	\[ \square 24/7 \text{ contact}	⊔ text OK
Mailing Address		Alt. Phone		□ text OK
Email				
Managing Agency, Agent or L	ocal Contact Person	n		
Name		Phone	\ \preceq 24/7 contact	□ text OK
Mailing Address		Alt. Phone		□ text OK
Email				
I/We Hereby Certify to the Foll	l <b>owing:</b> (all boxes mu	ust be checked)		
☐ A minimum of \$500,000 liabil rental.	lity insurance coveraç	ge is maintained to cover	the commercial use of the sh	ort-term
☐ All safety devices including s	moke detectors, CO2	2 detectors and fire exting	guisher are installed and in wo	rking order.
☐ There have been no interior a	alterations affecting the	he number of bedrooms.		
Attached Documents:				
$\hfill \square$ Verification all owed hotel and	d sales taxes have b	een paid		
☐ Septic Tank Pumping Record	d (as applicable, ever	ry three years)		
I/We hereby certify that the above subject to enforcement as provide			derstand that any false informa	ation is
Owner Signature	 Date	Managing Agency/A	gent/Local Contact Person	Date