



**Section A –PROPERTY OWNER INFORMATION**

**1-Check One:**  Individual  Multiple Individuals  LLC  Family or Personal Trust  
*(if other than Individual is checked, must complete Vacation Rental Ownership Form. A partnership or corporation may not apply for a Vacation Rental Registration Certificate.)*

**2-Owner Name:**

---

**3-Owner Mailing Address:**

---

---

**4-Owner Physical Address (Residence if different than above Owner Mailing Address):**

---

---

**5-Phone #:** \_\_\_\_\_ **Alternate Phone #:** \_\_\_\_\_

**6-Email:** \_\_\_\_\_

**7-Has Owner ever previously held a City of Palm Springs TOT Permit?**  Yes OR  No

**8-Does Owner have a financial or beneficial interest in any other Vacation Rental or Homesharing property in the City of Palm Springs currently?**  Yes  No

**SECTION B – VACATION RENTAL PROPERTY INFORMATION (no more than one Vacation Rental property is allowed.)**

**1-Vacation Rental Property Address:**

---

**2-What is the type of property you are vacation renting:**

Single Family Home  Condo  Casita  Duplex (Owner must reside on-site in a unit; must present proof of residency)

**3-Total Number of Bedrooms:** \_\_\_\_\_ *(Regardless of how many you will rent. If you have 5 or 6 bedrooms, you must complete the Estate Home Addendum. DSPC will verify number against County records; if discrepancies, DSPC will schedule an on-site bedroom count.)*

**4-Is the Vacation Rental property within an HOA** (applies to condos, duplexes, and single family homes

YES  NO *(If YES, have you attached the required letter from the HOA Board or Management Company stating that this specific Vacation Rental will not violate CC&Rs or other HOA rules included?  YES)*

Name of the HOA: \_\_\_\_\_

**5-Is your signed Electrician’s Pool Certification attached with paid invoice or inspection report?**  YES *(It is applicant’s sole responsibility to obtain this Certification from a licensed electrician; find form at [www.psvacationrentalcompliance.com](http://www.psvacationrentalcompliance.com)). Form not needed if there is a shared pool and/or spa maintained by the HOA, but must complete 5a below.)*

*5a-If the pool and/or spa is shared and not exclusive to your Vacation Rental property and is maintained by an HOA, you must initial here \_\_\_\_\_.*

6-Is your proof of liability insurance in the amount of no less than \$500,000. per occurrence included? \_\_\_\_\_ YES  
(The City of Palm Springs does not need to be additional named insured.)

7-Are you including a Family and Friends Form with this Application? \_\_\_\_\_ YES or \_\_\_\_\_ NO (If so, these guest stays are not included in the total annual contract count; owner may update this form ONLY at the time of each renewal.)

8-Is the property on Tribal leased land? \_\_\_\_\_ YES \_\_\_\_\_ NO

9-By signing this Application, you are agreeing to the indemnification/hold harmless agreement below:

Owner, agrees to indemnify, save, protect, hold harmless, and defend the City of Palm Springs, the City Council of the City of Palm Springs, individually and collectively, and the City of Palm Springs representatives, officers, officials, employees, agents, and volunteers from any and all claims, demands, damages, fines, obligations, suits, judgments, penalties, causes of action, losses, liabilities, or costs at any time received, incurred, or accrued as a result of, or arising out of Owner's actions, or inaction in the operation, occupancy, use, and/or maintenance of the Property.

10-Local Contacts. You must include at least one local contact below that can respond to a DSPC Official 24 hours x 7 days a week; response must be physically at the Vacation Rental property within 30 minutes from the time of the call.

Local Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Local Contact Address: \_\_\_\_\_ City: \_\_\_\_\_

Signature of Local Contact: \_\_\_\_\_

Secondary Local Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Local Contact Address: \_\_\_\_\_ City: \_\_\_\_\_

Signature of Local Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

11-List all advertising sites you plan to use: \_\_\_\_\_

**SECTION C – SIGNATURES AND DATES**

**Please complete Sections A-D of this Application.**

**Thank you for your Application.**

**PLEASE NOTE:** *DSPC current processing time is **approximately 45 days** from the day we receive your completed Application.*

- *You will be contacted by the DSPC who will conduct an annual Safety Inspection of the Vacation Rental property (view the form at [www.psvacationrentalcompliance.com](http://www.psvacationrentalcompliance.com).)*
- *You are not authorized to advertise or otherwise operate as a Vacation Rental until you receive specific written authorization from the DSPC; administrative fines and penalties will apply.\**

**\*INCLUDE THE DATE YOU ARE REQUESTING TO BEGIN OPERATING, INCLUDING ADVERTISING (must be at least 45 days from the date complete Application is received by DSPC) \_\_\_\_\_**

*I declare under penalty of perjury that the information on this Application is to the best of my knowledge, true, correct and complete. Any false statements will deem my Vacation Rental Registration Certificate void and will preclude any future vacation rental certificates and/or permits within the City of Palm Springs.*

**OWNER SIGNATURE: \_\_\_\_\_ DATE SIGNED: \_\_\_\_\_**

---

**FOR DSPC OFFICE USE ONLY:**

DATE APPLICATION RECEIVED BY DSPC: \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_

ZONE ON TITLE: \_\_\_\_\_

DATE SAFETY INSPECTION PERFORMED: \_\_\_\_\_ PERFORMED BY: \_\_\_\_\_

DATE BEDROOM COUNT PERFORMED: \_\_\_\_\_ PERFORMED BY: \_\_\_\_\_

A/R PROCESS DATE: \_\_\_\_\_ A/R CUSTOMER: \_\_\_\_\_ INVOICE #: \_\_\_\_\_

NOTES:

**SECTION D - VACATION RENTAL REGULATIONS**

It is Owner’s responsibility to understand and comply with Palm Springs Municipal Code Chapter 5.25, Vacation Rentals, AND Palm Spring Municipal Code Chapter 3.24, Transient Occupancy Tax Regulations. Below are key requirements but there are others. *Owner, please read and initial below.*

Short Term Vacation Rental property shall only be rented 32 times in any calendar year. In 3<sup>rd</sup> quarter of each year (Jul/Aug/Sep) 4 additional contracts are allowed, for a total of 36 contracts. For the first year when a Vacation Rental Registration Certificate is in effect, the 32 contract limitation shall be prorated based on the number of months that have elapsed prior to the issuance of the Vacation Rental Registration Certificate.

Initial \_\_\_\_\_

Prior to each occupancy, the Owner or Agent shall enter into a written contract with a Responsible Person 25 years of age and older; the contract shall include all requirements of the PSMC 5.25. Owner or Agent shall ensure that a summary of each such written contract is filed as required with the Department of Special Program Compliance prior to occupancy.

Initial \_\_\_\_\_

There is a 24/7 short term vacation rental hotline set up for residents to call for any concerns in regards to vacation rental properties. The Vacation Rental Hotline number is 760-322-8383. The hotline will dispatch Department of Special Program Compliance officers to investigate hotline reported concerns and your Local Contact Person may be contacted to assist in all such cases. Your Local Contact Person must be available at property within 30 minutes of the call.

Initial \_\_\_\_\_

NO outside amplified music is allowed while being rented. Indoor amplified music shall not be heard at the property line.

Initial \_\_\_\_\_

All home repairs inside and outside of the home including yard maintenance, pool service, general repairs and general maintenance are to occur between hours of 8:00am and 5:00pm Monday - Friday, except in the cases of emergency repairs or events that reasonably warrant a timely response.

Initial \_\_\_\_\_

Walk-in level of trash service or higher is required. By submitting this Application, you authorize the City of Palm Springs to upgrade your trash service on your behalf. If you already have walk-in service you must provide a current Palm Springs Disposal Service billing showing the walk in level of service or higher at the time of the application.

Initial \_\_\_\_\_

Good Neighbor Brochure and Statement of Rules and Regulations (available online in pdf format) must be provided to the Responsible Person, signed by all guests, and posted conspicuously in the Vacation Rental property at the front door and back door, for each occupancy. In addition, a copy of the Registration Certificate must be posted conspicuously at the front door.

Initial \_\_\_\_\_

The Owner or Agent must meet the Responsible Person on the contract in person at the Vacation Rental property or the Owner’s or Owner’s Agent office prior to, or within 24 hours of commencement of occupancy.

Initial \_\_\_\_\_

Annual training from the City’s Department of Special Program Compliance is required for Owners and Agents and representatives that address the Vacation Rental rules and regulations. Owner and any Agent or representative of Owner that is in contact with guests has viewed the educational videos and tests on the City’s website at [www.psvacationrentalcompliance.com](http://www.psvacationrentalcompliance.com).

Initial \_\_\_\_\_

Transient Occupancy Tax (TOT) of 11.5% must be collected on short term stays of 28 consecutive days or less. A TOT return must be filed monthly, **even if no tax is due**. TOT returns must be physically received at the City Hall TOT desk by 6:00pm on the last working day of the month following the close of each calendar month. Delinquency is determined by the date received, not the postmark date. Occupancy and car limits are strictly enforced.

Initial \_\_\_\_\_

Initial \_\_\_\_\_

Number of Bedrooms	Total Overnight Occupants (plus 2 children 12 years of age or under)	Additional Day Time Occupants	Total Daytime Occupancy	Total Vehicles Allowed
Studio/1	2	4	6	1
2	4	4	8	2
3	6	4	10	3
4	8	4	12	4
<b>5 Estate Only</b>	<b>10</b>	<b>4</b>	<b>14</b>	<b>5</b>
<b>6 Estate Only</b>	<b>12</b>	<b>4</b>	<b>16</b>	<b>6</b>

**I declare under the penalty of perjury that I have reviewed the requirements of the City of Palm Springs’ Transient Occupancy Tax Regulations (PSMC Chapter 3.24) and Vacation Rental Regulations (PSMC Chapter 5.25), and understand the procedures for remitting such tax and tax form to the City of Palm Springs each month, *whether I have rentals or not*, and agree to comply with all requirements of the Palm Springs Municipal Code.**

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

**Owner Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_