



City of Rockaway Beach, Oregon

276 S. Highway 101, PO Box 5

Rockaway Beach, OR 97136

Cityhall@corb.us

Phone (503) 374-1752

License # \_\_\_\_\_

SHORT TERM RENTAL LICENSE APPLICATION

All NEW applications must be submitted via mail or dropped off with full payment. We will ONLY accept emailed complete packets with a current STR license on file. Incomplete packets shall not be accepted or processed.. Failure of the owner to supply complete information within 30 days of the initial application submission shall result in its expiration. Applicants can request in writing for a one time only 30-day extension after receiving communication of an incomplete application. All short-term rental licenses must apply for renewal annually.

\$250.00 Annual License Fee (valid 07/01 to 06/30) (Fee is NON-REFUNDABLE nor subject to proration) The short-term rental license is issued to the owner and does not transfer with the sale or conveyance of the property.

1. Owners Applicant Name(s): \_\_\_\_\_

Owner Address\*: \_\_\_\_\_

\*Address must match ownership address on file at Tillamook County Tax Office Records)

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

2. Address of Short Term Rental: \_\_\_\_\_ (Each dwelling must apply separately)

3. Name of Rental (Example: Ocean Beach Getaway): \_\_\_\_\_

4. All Owners of property (Include any person with a legal interest if more than 3, provide an additional document).

Table with 3 columns: Name, Address, Phone. Includes horizontal lines for data entry.

5. Required Local Agent - City of Rockaway Beach Ordinance #22-442 requires each short-term rental to designate a local agent who will be available via phone and/or able to respond in-person to the short-term rental within thirty (30) minutes if needed. The owner or local agent shall maintain a telephone number listed within the rental unit and at the City by which to be reached 24 hours a day, 7 days a week, year-round.

6. Property Management Company (if applicable): \_\_\_\_\_

Agent/Owner Responder Name: \_\_\_\_\_

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

7. Off-Street Parking: \_\_\_\_\_ # of spots each 9' x 18'  Exception

Details of parking or exception (garage, driveway etc.): \_\_\_\_\_

8. Required Weekly Garbage Service provided by:  R Sanitary Service  Ecology Western Oregon
- Other: \_\_\_\_\_

**Checklist for required attachments to be submit. Missing information will cause the application to be incomplete.**

- ( ) Image of House Number or address identifier taken from the street.
- ( ) Image of Identification Sign - visible from the street, legible from 10 feet away and shall be no smaller than 93.5 square inches nor larger than 154 square inches.
- ( ) Parking Plan and Notice to provide within the rental.
- ( ) Proof of Liability Insurance

**BY MY SIGNATURE(s):**

1. I certify that the information on this application is accurate and that I will notify the City of Rockaway Beach should there be any changes in this application, including ownership and/or local contact person.
2. I state my understanding that is illegal to rent or to advertise for rent on a short-term basis this or any other property inside the City of Rockaway Beach without first obtaining and posting a current City of Rockaway Beach Short Term Rental License/Certificate of Authority as required in City of Rockaway Beach Ordinances #22-442
3. I agree to comply with all City of Rockaway Beach ordinances and regulations governing short term rentals and transient lodging taxes and acknowledge my understanding that failure to comply:
  - A. Shall result in fines as laid out in City of Rockaway Beach's Civil Infractions Ordinance #22-442.
  - B. May result in the revocation of my short-term rental license following its issuance.

Owner Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**OFFICE USE ONLY**

**Total \$250.00 (New Applications)**

**( ) Updated Required Application (No payment required)**

Date Received: \_\_\_\_\_

Application complete: \_\_\_\_\_ By: \_\_\_\_\_ Application Denied: \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_

License Number: \_\_\_\_\_ Receipt # \_\_\_\_\_ Date Issued: \_\_\_\_\_

Note: \_\_\_\_\_

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<sup>1</sup> Revision Date: 10/5/22