

Preferred Management Associates

PO Box 687
Moscow, PA 18444
570-795-4772
www.preferredmanagement.org

Dear Greene Township Resident,

In accordance with Greene Township Ordinance 99-2022 all short-term rentals must be registered with Greene Township and Preferred Management by March 4, 2023.

This packet represents the short-term rental registration process. Included in this packet are all forms to register your rental unit. Please complete and return to Preferred Management.

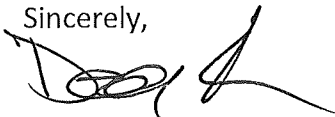
You can return the forms via email to:

deirdrek@preferredmanagement.org

Mail to:
Preferred Management LLC
Attn: Short Term Rentals
PO Box 687
Moscow, PA 18444

There are fees associated with each part of the application process, please pay special attention to the fee scheduled located on the Short Term Rental application to ensure your application is processed quickly.

Sincerely,



Deirdre Kohn, Short Term Rental Manager
Preferred Management Associates; AAMC

SHORT-TERM RENTAL PERMIT APPLICATION

GREENE Township, Pike County, Pennsylvania

Print or type (See attached Instructions)

App. No. _____

Property Owner Information

Name _____

Address _____

City _____

State _____ Zip _____

Phone _____

Email _____

24 Hour Phone number if no managing agency: _____

Property Information

TAX PARCEL (PIN) NO. _____ CONTROL NO. _____

PROPERTY SIZE (AC/SF): _____

PROPERTY LOCATION: (Development Name, Street Name, Lot No. - If not within a Major Subdivision, give distance and direction from nearest intersecting roads.):

EXISTING USE (i.e. Residential Home, Undeveloped Residential lot, Commercial building etc.)

WETLAND: ___ YES ___ NO FLOOD ZONE: ___ YES ___ NO

SEWAGE DISPOSAL: () On-lot () Community System

WATER SUPPLY: () Individual Well () Community System

ROAD ACCESS: () Private Road () Municipal Road () State Road

Information for license

24 Hour Telephone number of owner's managing agency _____

Marketing entity identification number _____

Total habitable floor space _____

Total number of bedrooms _____

Number of dwelling units _____ (example: single family dwelling = 1)

Maximum number of vehicles allowed for overnight occupants _____

Septic system age (approximate) _____ Capacity _____ Last service date _____

SEO Approval Date: _____ Number of Bedrooms: _____

Date Issued: _____ Township Official: _____

App. No. _____

RETURN COMPLETED APPLICATION AND ALL SUPPORTING DOCUMENTATION TO:

Note: License Required: Completed application will be forwarded to Preferred Management Associates, who will govern registration and licensing for all short-term rentals within Greene Township.

Preferred Management Associates, LLC
PO Box 687
Moscow, PA 18444

Telephone: 570-795-4772
deirdrek@preferredmanagement.org
www.preferredmanagement.org

Applicant/Owner Certification

I (We) hereby represent that the information provided herein and documents submitted herewith are true and correct and request that a Short Term Rental Permit be issued in reliance thereon. Further, I (We) have read all regulations pertaining to the operation of a short-term rental and agree to comply with them and the Greene Township Short Term Rental Ordinance, as amended. Signing of this application authorizes the Township Official and Short-Term Rental Management representative to perform all inspections required to ensure compliance with the Greene Township Short-Term Rental Ordinances.

Owner(s) Signature: _____ **Date:** _____

Co-Owner: _____ **Date:** _____

Note: If the applicant is not the owner, written permission from the Owner(s) is required.

Greene Township Official Use Only	
Date Application Received: _____	Fee: \$ _____ Check/Cash: _____
<input type="checkbox"/> Application Complete <input type="checkbox"/> Application Incomplete; Reason(s) _____	

Sewer Enforcement Officer Approval date: _____	
Property Verification of: 911 Address Sign _____	Short-term identification _____
<input type="checkbox"/> Permit Issued	
<input type="checkbox"/> Permit Denied; Reason(s): _____	

<input type="checkbox"/> Short Term Rental License fee paid	

SHORT-TERM RENTAL APPLICATION CHECKLIST

- _____ Copy of Short Term Rental application
- _____ Photograph of the short-term rental taken from primary entrance
- _____ Coliform/Bacteria Test
- _____ Floor plans – showing total habitable floor space, total number of bedrooms, maximum number of overnight occupants permitted in each bedroom
- _____ Site Diagram (Survey Map) – generally accurate, showing all structures & buildings, road, driveway, any water bodies/wetlands, indicating the number and location of designated on-site parking spaces, and location of septic system,
- _____ For On-Lot Sewage Disposal System: Evaluation from a pumper/hauler certifying the sewer disposal system is properly functioning, Proof of pumping within the last 3 years prior to this application
- _____ For Community Sewage Disposal System: Copy / Verification for: Community Sewage Disposal System hookup permit and number of bedroom allowance.
- _____ Copy of Pike County Hotel Room Excise Tax Certificate (verification that sales taxes are paid)
- _____ Copy of current deed/document that establishes applicants' ownership

To be verified before property is rented:

- _____ 911 emergency address sign in accord with applicable requirements
- _____ Post short-term rental identification

Payment:

- _____ Application Fee – \$300.00 total - check payable to Greene Township
 - Short Term Rental Administrative (annual) Fee \$100.00 - check payable to Greene Township
 - Sewage Enforcement Verification \$200.00- check payable to Greene Township
- _____ Short Term Rental License Fee – \$600.00 - check payable to Preferred Management

Short Term Rental Application

Greene Township, Pike County, PA

Property Owner Information

Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____

Rental Property Address _____

Rental Property City _____ State _____ Zip _____

24 hour local or Managing Agency Name _____

24 hour local or Managing Agency Phone Number _____

Total habitable floor space _____

Total Number of bedrooms _____

Total Number of Bathroom _____

Is there a Laundry Room? _____

Total Number of parking space _____

Number of Occupants (Overnight night occupants not to exceed 2 persons per bedroom) _____

Number of Dwelling Units (example single family dwelling =1) _____

Maximum number of vehicles (not to exceed the number of on-site parking) _____

Pool, Hot Tub or Spa _____

Fire pit or Burning area _____

GREENE TOWNSHIP SHORT TERM RENTAL CHECKLIST

Preferred Management Use Only

Address: _____

Homeowner Name: _____

Phone Number: _____

Date of Inspection: _____

Pass or Fail: _____

2nd Inspection Date (if needed): _____

3rd Inspection Date (if 1st & 2nd failed): _____

Occupancy Total (# of beds/max# of guests)/ (#parking spaces): _____

Managing Agent: _____

Short Term Rental Permit Number: _____

STR Fee Paid: Check Number _____ No _____

Number of Bathrooms : _____ Laundry Room: _____

- Copies of current Pike County hotel tax certificate & current PA sales/use tax permit
- Copy of current recorded deed for the property establishing ownership
- Photograph taken of property from primary entrance
- Proof of current insurance
- 911 Emergency Address sign and Short Term Sticker visible from road
- Coliform/Bacteria Test
- Carbon Monoxide Detector if solid fuel heating utilized
- Outdoor lighting directed away from adjoining property
- Smoke detectors in each bedroom
- Smoke detectors on each floor (If no bedrooms on floor)
- Smoke detectors outside each bedroom
- GFI outlets for outlets located within 6 feet of water sources (Sinks, Tubs, Showers)
- _____ Aluminum or metal exhaust from dryer
- _____ Carbon monoxide detector if garage is attached
- Fire extinguisher in kitchen
- Stairs – outdoor – in good condition
- Stairs – indoor – in good condition
- _____ Swimming pool, hot tub and spas must meet the Greene Township requirements.
- Minimum 1 parking space per bedroom, improved to mud free condition
- Fire and burning in compliance with Greene Township Ordinances
- Post in residence
 - 911 Address
 - Name and Number of Managing Agency or local contact
 - Maximum Number of Occupants and guests allowed
 - Number and location of parking and rules regarding snow removal, emergency vehicle access and right-of-way
 - Trash pick-up day and/or where refuse should be stored

**GREENE TOWNSHIP
SHORT TERM RENTAL CHECKLIST**

- Notification of possible citations and or fines for violating STR ordinance, parking and occupancy requirements

NOTES:

Example Posting in Residence

1. 911 Address
2. Name of Managing Agency, Agent, Property Manager, Local Contact, Owner and 24-hour number they can be reached.
3. Maximum Number of Occupants and Day Guest
4. Maximum Number of Vehicles and parking places
5. All vehicles must be in parking places on property
6. Rules regarding snow removal and not to block road.
7. Trash pick-up day and no trash or refuse shall be stored on the exterior of the property
8. Notification that there may be fines or citations for creating disturbances or violating the provisions of the ordinance