



**SMITHVILLE**  
missouri

107 W Main St • Smithville, MO 64089

P: (816) 532.3897

**CITY OF SMITHVILLE, MISSOURI  
SHORT-TERM RENTAL PERMIT APPLICATION FORM**

**Part 1**

**Short-Term Rental Property Address:** \_\_\_\_\_

**Applicant:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**Property Owner (If different from Applicant)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**Managing Agent (If applicable)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail Address: \_\_\_\_\_

## Part 2

Please identify the structure type of the short-term rental:

- Single Family Detached Dwelling Unit
- Two-Family Attached Dwelling Unit
- Townhouse
- Apartment

Please identify space to be rented:

- Entire Unit
- Single Bedroom
- Multiple Bedrooms

## Part 3

The following items must be submitted for review:

- The number of bedrooms in the unit.
- The total occupancy allowed in the unit.
- A list of online platforms that will be used to solicit booking transactions for the dwelling unit. Also provide the links to each platform's page for the unit.
- Certification that the property is current on all property tax and code violations fees/penalties. Certification may be in the form of a receipt from the County Collector for taxes.
- Certification that the dwelling unit is not subject to any contractual restrictions precluding the dwelling unit from being used for short-term rentals, including but not limited to homeowner association agreements, condominium bylaws, restrictive covenants, or building restrictions.
- Provide a certificate of insurance in compliance with Section 625.120.
- Provide a copy of the noise management plan in compliance with Section 625.140.

## Part 4

Responsibility Statement (Please initial next to each):

\_\_\_\_\_ I acknowledge that if any changes to the list of online platforms occur during the term of the license, an updated list with links must be sent to the Development Department within five (5) business days of change.

\_\_\_\_\_ I acknowledge that I will not discriminate in guest use or rental of a short-term rental and will comply with all applicable anti-discrimination laws, including but not limited to Title VII of the Civil Rights Act of 1968, the Fair Housing Act (FHA), and the Americans with Disabilities Act (ADA).

\_\_\_\_\_ I will register my short-term rental business with the City of Smithville.

\_\_\_\_\_ I have reviewed the short-term rental regulations contained in the City of Smithville Municipal Code Chapter 625 and agree to operate my short-term rental in compliance with the regulations.

\_\_\_\_\_ I understand that failure to comply with applicable regulatory standards may result in revocation of permit.

---

Signature

---

Date

***Fee: \$50.00***

***For office use only***

---

Approved: \_\_\_\_\_

Denied: \_\_\_\_\_

Authorizing Signature: \_\_\_\_\_