



CITY OF ST. JOSEPH
INSPECTION DEPARTMENT
700 Broad Street
St. Joseph, MI 49085
Phone (269)983-1212
Fax (269) 985-0347
www.sjcity.com

Rental Registration – Short Term (less than one month)

Process, Instructions and Application*

Contact City Staff to determine if Short-term rental is allowed at the specific address



Make application - must be complete



Schedule required inspection



City staff conducts inspection



Make necessary corrections



Rental certificate issued - good for two years

*See attached detailed directions for all steps involved.



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Process, Instructions and Application

1. **Contact Community Development Director (staff).** Staff will review zoning ordinance regulations and determine if short-term rental is an allowed use (need address of proposed location). The Zoning Ordinance provides for Short-Term Rental in the W Water Recreation District, R-3 Multiple Family Residence District and beginning in January 2024 in the D Downtown District when a Conditional Use or Special Use Permit has been issued. Application forms will be distributed and staff will determine if a pre-submittal meeting is necessary. In each case additional requirements must be met.
2. **Submission of Application.** If determined to be an allowed use, complete the application with all required documents and submit to the Inspection Department. Please note, that you will likely need to complete the Conditional Use Permit for Short-Term Rental Application.
3. **Acceptance of Application.** Staff reviews the application and supplemental information for completeness prior to formally accepting the application. All fees must be paid at this time
4. **Application is Formally Accepted.** Staff forwards the accepted application packet to the Community Development Director for review and approval.
5. **Rental Inspection Scheduled.** The Inspection Department schedules a specific date and time for the biennial inspection to occur.
6. **Inspection.** Either staff from the Public Safety Department or Inspection Department will meet the owner or representative on-site at the designated date and time. The interior and exterior of the building will be inspected per the adopted 2015 Michigan Property Maintenance Code and the requirements of the City of St. Joseph Code of Ordinances. At the end of the inspection, the owner or representative will know if the property passed or failed. A working telephone must be in the unit and we ask that it be furnished at time of inspection.
7. **Correction Notice Issued.** If the property does not pass the inspection, a notice of correction will be issued. All necessary permits must be applied for, issued and inspected prior to a Short-Term Rental Certificate being issued.
8. **Short-Term Rental Certificate Issued.** Once all outstanding issues have been satisfactorily addressed, the Inspection Department issues the Short-Term Rental Certificate which is good for two (2) years. If the property is sold or anything changes, the application must be updated within ten (10) days of the closing or changes made.



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RENTAL REGISTRATION FORM

Short-Term Rental - No Minimum Lease Time

Please print legibly. All portions must be completed. Do not leave any section blank, use N/A. Incomplete forms will be returned. Please allow one week for processing. PLEASE CONTACT STAFF TO DETERMINE IF ALLOWED.

New Registration: _____ Change of Owner: _____ Update Information: _____

Property Information

Property Address: _____ Unit Number: _____

Land Line Telephone Number for Unit: _____

Property Code Number (Tax Number): 11-76-_____

Type of Property (pick only one):

Single-Family Residence: _____ 2-Unit Building: _____ Condominium Unit: _____
 Apartment Complex: _____ Mixed Use Building: _____ Other: _____

Is there a Condominium or Homeowners Association? Yes: _____ No: _____

If Yes, does it allow Short-Term Rentals? Yes: _____ No: _____

Do you permanently reside in a dwelling unit located in the building: Yes _____ No _____

Unit Information (one form must be completed for each unit in a building)

Unit Number: _____ Total Number of Units in Building: _____

Number of Bedrooms in Unit: _____ Number of Parking Spaces for Unit: _____

Dimensions of Each Bedroom: (example: 10'1" x 13'3")

Bedroom #1: _____ Bedroom #2: _____

Bedroom #3: _____ Bedroom #4: _____

Owner Information

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ Emergency Number: _____

E-mail: _____

Rental Registration Form, continued

Property Address: _____

Unit Number: _____

Local Agent Information (see attached form)

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ Emergency Number: _____

E-mail: _____

Other Information Required

1. Conditional Use Permit or Special Use Permit grant by City of St. Joseph;
2. Provide site plan which shows location of on-site parking for the unit and/or building;
3. Provide one copy of a scaled floor plan of the unit;
4. Provide a fire escape plan, that once approved must be displayed prominently in the unit;
5. Provide a copy of the lease (see attached sheet with additional requirements);
6. If required, provide the completed Local Agent Designation and Authority Form; and
7. Is the owner delinquent on any payments to the city, regardless of whether it is for this property or another property, including real property taxes, water or sewer charges, special assessments, or any other amounts.

Acknowledgement

The signer(s) of this form does hereby state, warrant, certify and affirm the following:

The information supplied to the City of St. Joseph on this document is true to the best of my knowledge;

1. I understand and agree that all applicable fees must be paid and the unit pass inspection biennially to remain legal;
2. I consent to inspections of the dwelling unit by the city and will make the dwelling unit(s) available for inspection upon request;
3. I understand the fee schedule adopted December 10, 2018 and effective January 1, 2019 which includes the following:
 - a. Registration Fee: \$30 per owner/structure;
 - b. Initial and biennial inspection fees: \$70 for the first unit and \$50 for each additional unit on property;
 - c. Missed inspection fee: \$60 per appointment;
 - d. Failure to return affidavit by deadline: \$50 per unit;
4. I understand that expired Short-Term Rental Certificates will result in issuance of a Civil citation for operating and/or advertising without valid permit. The first offense is \$1,000, and \$2,500 each additional offense; and
5. I understand that this rental unit will comply with all requirements of associated with Short-Term Rental Permits.

Signature of Owner or Agent: _____ **Date:** _____

For Official City Use Only Date Received: _____

Zoning District: _____ Total number of occupants allowed: _____

Date of 1st Inspection: _____ Permit Number: _____

Fees: \$30 registration fee per building + \$70 biennial inspection fee for first unit and + \$50 for each additional unit. All fees are non-refundable.

Total Due: _____ Check Number: _____



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Local Agent Designation and Authorization – Short-Term Rental

Please print legibly

Rental Property Information

Property Address: _____ Unit Number: _____

Land Line Telephone Number for Unit: _____

Property Code Number (Tax Number): 11-76-_____

Owner Information

Name: _____

Local Agent Information

If the Local Agent is handling properties approved for Short-Term Rental, the Local Agent must have an address in any of the following: Cities of Benton Harbor, Coloma or St. Joseph; the Townships of Benton, Coloma, Hagar, Lincoln, Royalton, Sodus, or St. Joseph; or the Villages of Shoreham or Stevensville.

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ Emergency Number: _____

E-mail: _____

I designate and authorize the Local Agent named above to act on my behalf with regard to all duties imposed upon me by the City of St. Joseph's ordinances and rules regulating the Short-Term Rental unit identified above, including accepting service of notices, process or other legal documents issued by the City in such matters. I also agree to that I will notify the City and the Local Agent, in writing, should I ever revoke this appointment, and no such revocation shall be effective until received by the City.

Owner's signature

Date

I accept the designation and authority noted above, I certify that the contact information is correct, and I agree that I will notify the Owner and the City in writing in the event of any changes in that information or if I am no longer serving as Local Agent for this Short Rental unit.

Local Agent's signature

Date

City of St. Joseph – Short-Term Rental “Safe Haven” Language

The City’s ordinance regulating Short-Term Rentals requires that certain information be included in the lease, and also that certain information be posted in the rental unit to help a tenant summon emergency responders. The following sample language is provided as an aid to property owners, and when the appropriate individualized information is added, will be accepted by the City as satisfying the requirements of the ordinance. Property owners are not required to adopt this specific language, and are free to develop their own language meeting the requirements of the ordinance.

Disclosures required in Short-Term Rental leases under Section 8-107(b) and (c).

1. The City of St. Joseph requires that the following disclosures be made to tenants of short-term rentals:

The maximum lawful occupancy of this rental unit is ____ persons. Off-street parking is required under City ordinance; as part of this lease you have rights to ____ parking spaces on the property. In case of emergency, the telephone number of this rental unit is _____. Under City ordinance, it is unlawful to play or operate an musical instrument, phonography, or radio in such a manner as to cause loud or unusual sound or noise between the hours of 10 PM and 7 AM; it is also unlawful at all times to make any unnecessary loud or unusual noise which annoys the comfort, repose, health or safety of the public. You have the right to receive a copy of the rental unit permit, form the landlord, at your request. The rental unit permit must be prominently posted in the rental unit during your use of the property. A responsible tenant must sign and acknowledgement of the regulations, and provide contact information. Smoke detectors are provided in each rental unit as provided by law; no person shall tamper or interfere with the effectiveness of a smoke detector. Violators may be punished as provided under City ordinance.

2. Emergency information required to be posted in short-term rental units under Section 8-107(b).

EMERGENCY INFORMATION

_____ [Street Address]
City of St. Joseph

In the event of an emergency requiring police, fire, or medical assistance, dial 9-1-1 immediately if it is safe to remain on the premises; if it is not safe, go to a place of safety and then call 9-1-1. For all 9-1-1 calls, the telephone provided in the unit rings directly at the Berrien County 9-1-1 dispatch center, the Enhanced 9-1-1 system is intended to automatically provide your location to emergency personnel. Please confirm your address and the nature of your emergency, and follow the dispatcher’s instructions.

If you call 9-1-1 from a cell phone, your call will be routed to the Berrien County dispatch center. The dispatch center will send the appropriate assistance. Cell phones may or may not automatically provide address information to emergency personnel.

You are located in the City of St. Joseph, at _____ [Street Address]. This structure is a _____ [color], _____ [describe the structure – i.e., one-story house, two-story house, apartment building, etc.], located on _____ [street name] _____ [distance and direction form cross street or other landmark]. Emergency responders can best enter this unit by _____ [descriptive information as provided by owner].

The non-emergency number of the St. Joseph Police Department is 269-926-2538 and is answered by City of St. Joseph Public Safety Department during normal business hours.