

STRP RENEWAL AFFIDAVIT

Comes now affiant _____, designated representative for Short Term Rental Property ("STRP") Permit # _____ for the property located at _____ and states as follows, based upon the affiant's personal knowledge:

1. That I am over the age of eighteen and competent to provide this Affidavit.
2. That I am the designated representative for STRP Permit # _____.
3. That I wish to continue the permitted operation of an STRP at _____, pursuant to MCL 17.16.070U.
4. That the floor plan at the permitted address has not changed since the prior STRP inspection and approval by the Metro Fire Marshal.
5. That I possess the full insurance coverage for the STRP, as required by MCL 17.16.070U.
6. That I have paid all applicable taxes related to this permit and this land use.
7. That I have not violated the requirements for operation of a permitted STRP, pursuant to MCL 17.16.070U.

FURTHER, AFFIANT SAITH NOT:

SIGNATURE

DATE

Affiant's PRINTED Name _____

Affiant's Address _____

CONTACT INFORMATION FOR RESPONSIBLE PARTY WITHIN 25 MILE RADIUS OF THE SUBJECT PROPERTY

First/Last Name: _____

Address: _____

Phone: _____

Email: _____

COUNTY OF DAVIDSON)
STATE OF TENNESSEE)

Before me, a notary public for said county and said state, appeared _____,
with whom I am personally acquainted, or proved to me on the basis of satisfactory evidence, and who
acknowledged that he is the Representative for STRP Permit # _____, and that
in the capacity of Representative executed the foregoing Affidavit for the purposes therein contained.

This the ___ day of _____, 201_.

My Commission Expires: _____