

For Questions and Submittals:

Roane County Building and Codes Office

308 N. Third St.

Kingston, TN 37763

865-717-4230



Roane County Short Term Rental Permit Packet

What is a Short Term Rental Unit?

Rentals that are listed and booked through a hosting platform or social media platform for less than 30 days at a time.



How to Apply for Your Short Term Rental Permit

- 1) Go to the Roane County Government Website
- 2) Click Self Service Portal
- 3) Click "Apply for a Business License"
- 4) Click "Apply for Short Term Rental"
- 5) Download to fillable application and complete
- 6) Click Upload

Step By Step Guide

- 1) Verify HOA Covenants and Restrictions
- 2) Apply for Business License - <https://roanecountytn.gov/business-licenses/>
- 3) Fill out all forms in this packet. Check for completion before submission.

Application

Acknowledgment of STR Regulations signed by owner

Site Plan Information Overview

Site Plan Floor Plan

Life Safety Compliance Verification

Neighborhood Notice (see page 7)

Copy of Roane County Business License

Paid \$200.00 application fee to Roane County Building and Codes at 865-717-4230

2) Submit all forms together as a complete packet

- 3) A consultation will be set up to verify the floor plan and life safety items and permitted use per zoning.
- 4) Send a Neighborhood Notification form to all adjacent neighbors and neighborhood organization
- 5) You will be notified when your Short term Rental Unit Permit is available to be issued.

A PERMIT IS VALID FOR 1 YEAR FROM DATE OF ISSUANCE, AFTER WHICH IT MUST BE RENEWED.



SHORT-TERM RENTAL UNIT PERMIT OPERATOR APPLICATION

1. Location of proposed Short-Term Rental ("STR"):

Address _____

Zoning District _____ Zip _____

2. What is the Operator's relationship to the STR? Check all that apply.

Owner Resident Lessee Other—Please Describe _____

3. What type of dwelling is the STR?

Single Family Home Duplex or Townhouse Garage Apartment Condominium

Apartment in Apartment Building Carriage House Other—Please Describe _____

4. Name of Operator: _____

Address of Operator: _____ Zip _____

Phone: _____ Email address: _____

NOTE: If the Operator is a business entity, below provide the name, address, email address, and phone number of the entity's contact person. Also, attach proof that the entity is in good standing with the Tennessee Secretary of State.

Name: _____ Address: _____

Zip: _____ Email address: _____ Phone: _____

If the Operator is not the Owner of the property, provide below the name, address, email and phone number of the Owner of the property.

Name: _____ Address: _____

Zip _____ Phone: _____ Email Address: _____



**SHORT-TERM RENTAL UNIT PERMIT
OPERATOR APPLICATION**

5. If the Operator is not the local contact person for the STRU, provide below the name, address, email address, and all telephone numbers of the local contact person.

Name: _____ Address: _____

Zip: _____ Email address: _____ Phone: _____

Alternate Phone: _____ Alternate Phone: _____

6. Name(s) of hosting platform(s) and internet website(s) where STR will be advertised:

7. **ATTACHMENTS**

- Proof of ownership of the STRU
- Acknowledgement of STR Regulations
- Site plan (using the forms provided in this packet)
- Life Safety Compliance Verification
- Business License
- Neighborhood Notice
- Paid \$200.00 Application fee

**SHORT-TERM RENTAL UNIT
PERMIT OPERATOR
APPLICATION**

**LIFE SAFETY COMPLIANCE
VERIFICATION FORM**

The Operator must certify compliance by signing below. All fields are required.

Verification of number and locations are required for the entire property, even those areas or rooms that are not available for Occupancy as part of the Short-Term Rental Unit. Every smoke and carbon monoxide alarm must function properly with the alarm sounding after pushing the test button. Smoke alarms must meet Underwriters Laboratory (UL) 217 standards and must be installed inside sleeping rooms, outside sleeping rooms in the immediate vicinity of bedrooms, and on each story, including basements. Carbon monoxide alarms must be within 15 feet of the door of all bedrooms. There must be at least one (1) fire extinguisher in the Short-Term Rental Unit.

Number and location(s) of smoke alarms:

Number and location(s) of carbon monoxide alarms:

Number and location(s) of fire extinguishers:

BY SIGNING BELOW, I AFFIRM THAT THE CONTENTS OF THIS FORM ARE TRUE AND THAT THE EQUIPMENT NOTED ABOVE IS FULLY OPERATIONAL. I ACKNOWLEDGE THAT THE COUNTY SHALL VERIFY THE PLACEMENT AND OPERATION OF THE EQUIPMENT BY INSPECTION.

OPERATOR/APPLICANT

Signature: _____

Print Name: _____

Date: _____

SITE PLAN INFORMATION:

ADDRESS _____



Square Footage of the STR	_____
Number of Bedrooms in STR	_____
Number of Bathrooms in STR	_____
Number of Bedrooms Listed on Hosting Platform	_____
Number of Floors with Habitable Space	_____
Number of Doors Exiting to Exterior	_____
Number of Vehicles Accommodated by Driveway	_____



**SHORT-TERM RENTAL UNIT PERMIT
OPERATOR APPLICATION**

SITE PLAN INFORMATION: FLOOR PLAN

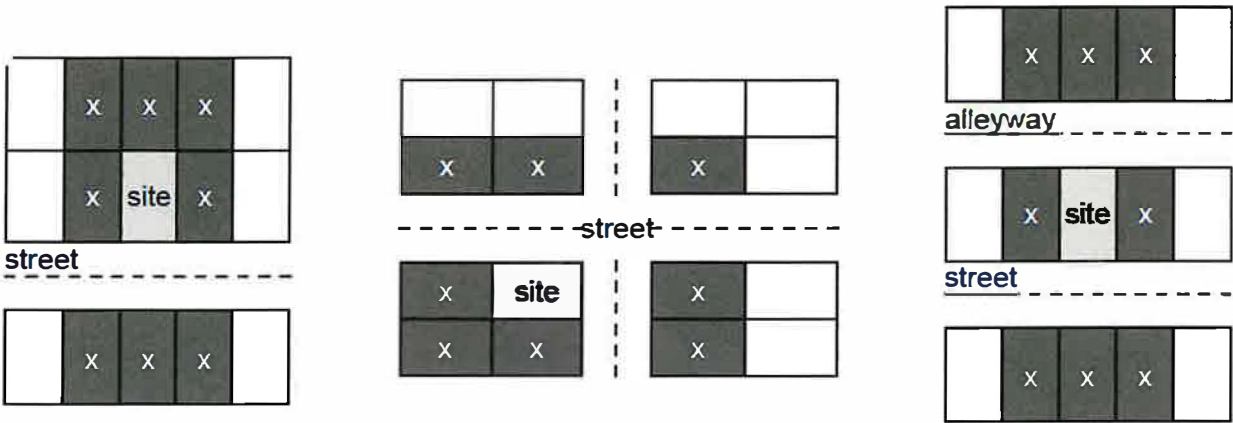
Please draw a floor plan of the STR below and illustrate where parking will be located. You may also attach a digitally produced drawing.

ADDRESS _____

Neighborhood Notice Short-Term Rental Unit Permit

Hello Neighbors, Neighborhood Representatives, and Property Owners! The Roane County Ordinance at allows me to rent my property to overnight guests on a short-term basis (less than 30 days).

You are receiving this notice because, as part of the permit application, I am required to mail or deliver this notice to the neighborhood association in the area where my home is located and to all property owners with properties abutting, directly and diagonally across the street from my residence. See figures below for permit notice area.



Below is a brief description of my short-term rental—including number of bedrooms to be rented and where my guests will be parking. I have also included relevant information you might find useful such as how my guests will be accessing my residence.

Address of the Short-Term Rental: _____

Name of Owner-Occupant: _____

Phone Number for Owner-Occupant: _____

This notice is provided as a courtesy so neighborhood representatives and adjacent neighbors are aware of this activity happening in their neighborhood. For your convenience, you may call Roane County Building and Codes Office at (865) 717-4230 for your questions and concerns. You may also, visit the Roane County Building and Codes Office in person at 308 N. Third St., Kingston, TN 37763.