Preferred Management Associates

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

Dear Lehigh Township Resident,

In accordance with Lehigh Township Ordinance 2022-2 all short-term rental permits must be renewed with Lehigh Township and Preferred Management no later than February 15, 2024. Any renewal received after will result in a fee of twice the normal amount. The rental registration is a two-part process, part 1 with Lehigh Township, part 2 with Preferred Management.

This packet represents both parts of the short-term rental registration process. Included in this packet are the Lehigh Township forms and the Preferred Management forms. Please complete all sections on both sets of forms and return to Preferred Management.

You can return the forms via email to:

deirdrek@preferredmanagement.org

Mail to: Preferred Mai

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

Fax to 570-843-4758

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.

If you are unable to make your inspection, 24 hour notice is required. If 24 hour notice is not give it will result in inspection failure. Once your inspection is completed if you do not pass you will have 30 days from the date of the inspection to remedy the issue.

Sincerely,

Deirdre Kohn

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

Office: 570-795-4772 Cell: 570-290-0070

www.preferredmanagement.org

SHORT-TERM RENTAL ZONING PERMIT RENEWAL **APPLICATION**

Lehigh Township, Wayne County, Pennsylvania

Print or type (See attached Instructions)		Permit No.	
Property Owner Information			
Name Address City State Zip Phone Email	 24 Hour Pho	one number if no managing agency:	
Property Information			
TAX PARCEL (PIN) NO	dential Home, Undeveloped I	If not within a Major Subdivision, give Residential lot, Commercial building etc.)	
WATER SUPPLY: () Individual Well ROAD ACCESS: () Private Road	() Community Sys		
Information for license 24 Hour Telephone number of owner's man Marketing entity identification number	naging agency		
Total habitable floor space Total number of bedrooms (examp Number of dwelling units (examp Maximum number of vehicles allowed for Septic system age (approximate)	ele: single family dwellin	ng = 1) Last service date	
Date Issued:	Zoning Officer:		

SHORT-TERM RENTAL AND ZONING PERMIT APPLICATION

App. No

RETURN COMPLETED APPLICATION AND ALL SUPPORTING DOCUMENTATION TO:

Lehigh Township Phone: 570-842-6262 32 Second St. Fax: 570-842-7042 P.O. Box 651 Cell: 570-236-0020

Gouldsboro, Pa. 18424 Email: lehigh.zoning@gmail.com

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

Preferred Management Associates, LLC

PO Box 687 Telephone: 570-842-2705

Moscow, PA 18444 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 Zoning Land Use and 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 Lehigh Township Zoning Ordinance, as amended. Signing of this application authorizes the Township Zoning Officer and Short-Term Rental Management representative to perform all inspections required to ensure compliance with the Lehigh Township Zoning and Short-Term Rental Ordinances.

Owner(s) Signature:		Date:
Co-Owner:		Date:
Note: If the applicant is not the owner, w	vritten permissior	n from the Owner(s) is required.
Zoning Officer Use Only		
Date Application Received:	Fee: \$	Check/Cash:
() Application Complete () App	olication Incomple	Check/Cash: ete; Reason(s)
Savar Enforcement Officer Approval	data	
Sewer Enforcement Officer Approval of Property Verification of: 911 Address	s Sion	Short-term identification
Froperty Verification of. 911 Address	5 51gii	Short-term identification
() Permit Issued		
() Permit Denied; Reason(s):		
() Short Term Rental License fee paid	d	

SHORT-TERM RENTAL ZONING PERMIT RENEWAL APPLICATION CHECKLIST Note: only items that have changed from original application are necessary
Copy of Short-Term Rental Zoning Permit Renewal application
For all Sewage Disposal Systems: Proof of pumping/maintenance within the last 3 years prior to this application
For Wayne County Hotel Room Excise Tax - verification that sales taxes are paid
Short Term Rental Renewal Application fees:
Short Term Rental Zoning Permit (annual) \$150.00 - check payable to Lehigh Township
Short Term Rental License Fee – \$600.00 - check payable to Preferred Management

Short Term Rental Renewal Application

Lehigh Township, Wayne County, PA

Property Owner Information Name _____ 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 ______ If any information below changed fill in the corrected information 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 (not to exceed 12) 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

LEHIGH TOWNSHIP SHORT TERM RENTAL CHECKLIST

Preferred Management Use Only
Address:
Homeowner Name:
Phone Number:
Date of Inspection:
Pass or Fail:
3 rd Inspection Date (if 1 st &2 nd failed):
Occupancy Total (#, of beds/max# of guests)/ (#parking spaces):
Managing Agent:
Zoning Permit Number:
STR Fee Paid: Check Number No
Number of Bathrooms : Laundry Room:
\square Copies of current Wayne 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 road
☐ Proof of current insurance
☐ 911 Emergency Address sign and Short term Sticker visible from road
☐ Smoke detectors in each bedroom
☐ Carbon Monoxide Detector if solid fuel heating utilized
☐ Outdoor lighting directed away from adjourning property
☐ 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 <i>sources</i> (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 Lehigh Township requirements.
☐ Minimum 1 parking space per bedroom, improved to mud free condition
☐ Fire and burning in compliance with Lehigh Township Nuisance Ordinance
☐ Post in residence
☐ 911 Address
☐ Name and Number of Managing Agency or local contact
☐ Maximum Number of Occupants and guest allowed
\square Number and location of parking and rules regarding snow removal, emergency vehicle access and
right-of-way
\square Trash pick-up day and/or where refuse should be stored
☐ Notification of possible citations and or fines for violating STR ordinance, parking and occupancy
requirements

LEHIGH TOWNSHIP SHORT TERM RENTAL CHECKLIST

NOTES: