



1510-B Third Street  
 Tillamook, Oregon 97141  
 Phone: (503)842-3408

STVR # \_\_\_\_\_

Applicant: \_\_\_\_\_  
 Mailing  
 Address: \_\_\_\_\_

Owner of Record: \_\_\_\_\_  
 Mailing  
 Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Rental Location**

Street Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Map & Tax Lot Number: \_\_\_\_\_

Local Contact Person: \_\_\_\_\_

Name

Phone Number

Address

Email

**RENTAL INFORMATION**

Year Built:	# of Stories:		Designated Parking Spaces:		Basement: Yes [ ] No [ ]
	Sleeping Areas:		# of Bedrooms:		Public Sewer: Yes [ ] No [ ]

AS DEFINED IN TILLAMOOK COUNTY ORDINANCE #84, THIS IS A LAWFULLY ESTABLISHED DWELLING UNIT.

I HEREBY CERTIFY THAT ALL STATEMENTS CONTAINED HEREIN ALONG WITH EVIDENCE SUBMITTED, ARE IN ALL RESPECTS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I HAVE MET AND WILL CONTINUE TO COMPLY WITH THE REQUIREMENTS SET FORTH IN TILLAMOOK COUNTY ORDINANCE #84.

Applicant / Local Contact Signature \_\_\_\_\_ Date \_\_\_\_\_

Owner of Record Signature \_\_\_\_\_ Date \_\_\_\_\_

**Approval:**

Director, Community Development \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date \_\_\_\_\_ Fees Pd \_\_\_\_\_ Check # / CC \_\_\_\_\_ Rec'd By \_\_\_\_\_

Permit # \_\_\_\_\_ TLT # \_\_\_\_\_

Inspection Date \_\_\_\_\_ by \_\_\_\_\_ Maximum Occupancy \_\_\_\_\_