



<b>Office Use Only:</b>		
Tax Map #	_____	
Permit #	_____	Clerk _____

**Short Term Rental Application**

Permitting Office (864) 467-4550

The cost of the permit is **\$40.00**, make checks payable to the City Of Greenville.

Mailing Address: P.O. Box 2207, Greenville, SC 29602

With the growth of the “sharing economy,” the City is seeing an increase in residents using popular websites like Airbnb and VRBO to offer their homes for short-term rentals.

Under the City’s current zoning regulations, short-term rentals (rentals for a period of less than one month) are prohibited in residential zones R6, R9, RM-1, RM-2 and RM-3, except where allowed by Special Exception as a Bed and Breakfast.

In zones where they are permitted, short-term rentals are classified as “Visitor Accommodations” and fall into two categories:

**Hotel/Motel**

- Renting an entire dwelling on less than a month-to-month basis
- Requires a Short Term Rental Permit (this application)
- Allowed in C-3, C-4, S-1, and RDV
- Requires special exception permit in OD and C-2

**Bed & Breakfast Inn**

- Renting room(s) in an owner-occupied dwelling
- Requires an Accessory Use Permit for Home Occupation
- Allowed in OD, C-2, C-3, C-4, S-1, RDV, if the use meets the criteria set forth in City Ordinance [Section 19-4.3.3\(H\)](#)
- Requires special exception in R-6, R-9, RM-1, RM-1.5, RM-2 and RM-3

In addition to the required permits, the owner must also have a [business license](#) and must pay [accommodations tax](#).

**\*Indicates Required Field**                      **\*Date** \_\_\_\_\_

**\*Rental Property Address** \_\_\_\_\_ **Space/Unit** \_\_\_\_\_

**\*Mailing Address (if different)** \_\_\_\_\_

**\*Property Owner Name** \_\_\_\_\_ **\*Property Owner Phone** \_\_\_\_\_

**\*Property Owner Email** \_\_\_\_\_

**Covenants & Restrictions\***

The applicant affirms that all information submitted with this application; including any/all supplemental information is true and correct to the best of their knowledge and they have provided full disclosure of the relevant facts. The applicant affirms that the structure which is the subject of this application is, or is not, restricted by any covenant or contract that is contrary to, conflicts with, or prohibits, the requested activity.

In the event the applicant is not the property owner, the applicant affirms that s/he has made due inquiry of the property owner concerning the existence of any such covenants or restrictions.

If the planning office has actual notice \*that a restrictive covenant or contract\* is contrary to, conflicts with, or prohibits the requested activity, the office must not issue the permit unless the office receives confirmation from the applicant that the restrictive covenant or contract has been released by action of the appropriate authority, property holders, or by court order.

To that end, the applicant hereby affirms that the tract or parcel of land subject of the attached application \*is \_\_\_\_\_ or is not \_\_\_\_\_ restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the requested activity.

\*Type of Structure \_\_\_ Single Family Home \_\_\_ Multifamily (Apartment/Condo) \_\_\_ Duplex

\*Rental Type \_\_\_ Individual Room \_\_\_ Entire House or Unit

\*Rental Duration \_\_\_ Daily \_\_\_ Weekly \_\_\_ Monthly

\*Owner occupied during rental? \_\_\_ Yes \_\_\_ No

Additional Information? \_\_\_\_\_

\*Business Name \_\_\_\_\_

\*Applicant Name (print) \_\_\_\_\_ \*Applicant Phone \_\_\_\_\_

\*Applicant Email \_\_\_\_\_

\*Applicant Signature \_\_\_\_\_