

City of Cathedral City

68-700 Avenida Lalo Guerrero Cathedral City, CA 92234 Tel: (760)770-0324 www.cathedralcity.gov stvrprogram@cathedral.gov

SHORT TERM VACATION RENTAL INFORMATIONAL AND GUEST AGREEMENT ACKNOWLEDGEMENT FORM

STVR Property Address:				
Owner or Owner's Agent	's Name:			
		eck in, the Owner or Owner by during the duration of the		e this form is
Responsible Person (atta	ach a copy of va	alid government ID):		
Name:				
Address:				
Occupants (Occupancy I	imits: 2 persons	per bedroom, maximum o	f 10 persons):	
Name:		Name:		
Vehicle information of res	sponsible perso	n and occupants (one vehi	cle per bedroom):	
Person's Name	Vehicle Year	Vehicle Make/Model	Vehicle Color	License Plate Number



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ACKNOWLEDGEMENT

l,	, am the Responsible Person, for this vacation rental and		
	lge that I have been provided and/or advised, either in writing or verbally, of the following in from the Owner or Owner's Agent, upon checking in at the STVR:		
Initial	The city's short-term vacation rental provisions and regulations (e.g. music, noise, trash, occupancy limits, parking) was provided to me.		
Initial	I understand I must be present at the vacation rental property any time that the property occupied during the term of the rental period.		
 Initial	I have been informed of the Good Neighbor Brochure.		
Initial	I have been provided the local contact's 24-hour availability information		
Signature:	Date:		
Print Name	e:		