

CITY OF MARATHON<br>FIRE RESCUE<br>OFFICE OF THE FIRE MARSHAL<br>8900 Overseas Hwy., Marathon, FL 33050<br>"Dedicated to Community Fire Protection"<br>Emergency 911 Office 305-289-8938



Vacation Rental Agent License/Training Application
Application Fee: New Agent $\$ 500.00 \quad$ Continuing Agent $\$ 500.00$
Owner Agent/Local Contact: No Charge

## PLEASE CHECK ONE: $\square$ OWNER <br> AGENT <br> $\square$ LOCAL CONTACT

1) Your Name:

Address:
Contact Phone: $\qquad$ Email: $\qquad$
2) This license shall be valid for the period of one (1) year for Agents and Local Contacts, and (2) years for Owner/Agent.
3) All persons registering as Agent and/or Owner Agents agree to comply with the rules as set forth by City of Marathon Ordinance 2010-14, or face violation, fines, suspension and revocation of said License.
4) If you are the local contact, by signing this form, you are attesting that you live within 1-hour of the City of Marathon city limits, and you are aware of the local contact's responsibilities.

I hereby state that I have viewed and understand the materials contained in the Vacation Rental Agent Training PDF. I have also read and understand the contents of Ordinance 2010-14, Vacation Rentals, and agree to comply with the rules set forth by the City of Marathon. PASSWORD from the Training Material is $\qquad$
I certify that I am the owner agent local contact $\square$ (check one) of the property located within the City of Marathon located at:

Address (If managing or own multiple properties, please attach list).

Name (Please Print)

## Signature

Date

| NOTARY STATE OF $\qquad$ COUNTY OF $\qquad$ |  |
| :---: | :---: |
| Before me, this ___ day of __ ${ }^{\text {a }}$, $20 \ldots$, personally appeared |  |
| $\qquad$ , who executed this foregoing instrument, and acknowledged before me that same was executed for the purposes therein express.Personally Known or $\square$ Produced ID: $\qquad$ |  |
|  |  |
| Signature of Notary Public - State of | My Commission Expires |

