

SHORT-TERM RENTAL LICENSE APPLICATION

For the license term January 1 2027 – December 31, 2027



City of Breezy Point
8319 County Road 11
Breezy Point, MN 56472
deputycityclerk@cityofbreezypointmn.us
218-562-4441

FOR OFFICE USE ONLY	
Date Inspection Approved: _____	Initial: _____
License fee	
____ Annual License Fee	
Payment method: _____	____ Credit card
Received: _____	____ Application
	____ Septic Compliance
	____ Plans as required
	____ Proof of Insurance
	____ Off Street Parking Plan
Date processed: _____	Initial: _____
License # _____	

SITE INFORMATION

Site property address: _____
Year built _____

PROPERTY OWNER INFORMATION

Property owner's name(s): _____
(Required)
Property owner's address: _____
(Street address)

(City) (State) (Zip code)
Phone number(s) (Home/Public) (Cell)
Email address(es)

PROPERTY MANAGER/AGENT INFORMATION (if applicable)

Management company: _____ Agent: _____

(Street address) (City) (State) (Zip
code) (Company phone #) (Agent phone #) (Email address)

TENANT INQUIRIES, COMPLAINTS, AND CITY MAILINGS TO BE SENT TO: _____ Owner _____ Agent _____ →

