



**Public Health**  
Prevent. Promote. Protect.

**Stone County Health Department**  
Making Lives Better

# Stone County Health Department

North Location: 109 East 4<sup>th</sup> Street, Galena, MO 65656 Phone: 417.357.6134 Fax: 417.357.6031

South Location: 15765 State Hwy 13 Ste. 1, Branson West, MO 65737 Phone: 417.272.0050 Fax: 417.272.9058

## VACATION HOME RENTAL PERMIT APPLICATION

☐ New

☐ Renewal

Name of Establishment: \_\_\_\_\_

Physical Vacation Home Rental Address: \_\_\_\_\_

Vacation Rental Home Parcel ID#: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Owner Mailing Address: \_\_\_\_\_

Owner Contact number: \_\_\_\_\_ Email: \_\_\_\_\_

**Name, address and telephone number** of managing agency, agent or local contact person for the owner of the vacation home rental:

- ☐ I acknowledge as the owner/agent/ and or local contact person that I have read all regulations pertaining to the operation of a vacation rental.

Please include the following items:

- ✓ Evidence of a valid Stone County Merchants License
- ✓ Application and renewal fee of \$150.00
- ✓ Diagram or photograph of the premises showing and indicating the number and location of designated onsite parking spaces, and the maximum number of vehicles allowed for overnight occupants.
- ✓ Planning and Zoning Conditional Use Permit if required. Not required in incorporated areas (Villages, towns and cities).

\*\*\*\*\* Office Use

Only:

Date Received \_\_\_\_\_ Permit# \_\_\_\_\_

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER: Services provided on a nondiscriminatory basis