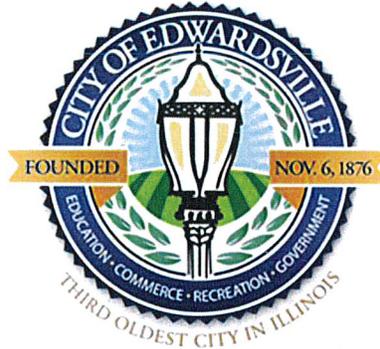


City of Edwardsville



Short-Term Rental License

Application Packet

Please ensure the following documents are submitted with this application.

- Short-Term Rental Application
- Business Registration Application
- Hotel/Motel Tax Forms
- Special Use Permit Application and \$700.00 Fee (if applicable) Not Applicable
- Annual Registration and \$50.00 Initial Inspection Fee

Office Use:

Date Submitted:	
Applicant Name:	
Location of Proposed STR:	

Procedures for Obtaining a Short-Term Rental License in Edwardsville, IL

Chapter 1248 of the City of Edwardsville's Zoning Codes outlines the process for licensing short-term rentals within city limits.

There are three types of licenses available:

- **Type A (Owner Occupied):** The owner must reside on the property during the rental period. This type of license does not require City Council approval. Resident submits license application packet only.
- **Type B (Non-Owner Occupied):** The owner does not need to be present during the rental period. A Special Use Permit (SUP) approved by City Council is required for this license type. Resident should contact the Planning Department at Public works to confirm if a SUP is necessary. If SUP is not required; resident submits a license application.
- **Bed & Breakfast (Owner Occupied with Meals):** Similar to Type B, this license requires a Special Use Permit approved by City Council. Contact Planning at Public Works for guidance on SUP process. After Special Use Permit is approved by council, resident submits license application.

Application and Licensing Process:

1. Determine License Type: Choose the type of license that best fits your needs, considering the requirements for each as outlined above.
2. Complete the Application Packet: the application packet is available at the Finance Office; Public Works Office; and on the City Website under Doing Business and Properties sections. The City of Edwardsville's website: <https://cityofedwardsville.com/713/Short-Term-Rental> provides more information about Short Term Rentals.
3. Submission and Review:
 - a. Submit the completed application and business registration to the Finance Department.
 - b. Finance forwards a copy to Planning in the Public Works Department.
 - c. Planning reviews application and upon approval, signs and dates the application, returning to Finance along with the approved SUP (if applicable).
4. A Building Inspection is initiated for approved properties.
5. License Issuance and Fees:
 - a. At the time of issuance, the Registration and Inspection fee of \$50.00 is required.
 - b. Finance will establish a Hotel/Motel Tax License once the completed form is received.
 - c. Finance will establish a Business License once the completed form is received.
 - d. The license is valid for a calendar year and due on January 1st annually. The annual renewal fee is \$50.00.
 - e. The STR License is printed and mailed to the applicant. A Reminder is sent annually for Registration and Inspection.

Important considerations:

- There is a limit of 30 Type A and 30 Type B short term licenses available in Edwardsville on a first come first served basis. A waiting list may need to be formed if licenses are not available.
- Applicants are also required to complete a Business Registration form and a Hotel/Motel Tax form through the Finance Department.



SHORT-TERM RENTAL APPLICATION

In addition to the short-term rental application, the applicant is required to complete the business registration and hotel motel tax forms and pay a \$50 annual registration and initial inspection fee. Thirty (30) Type A and thirty (30) Type B short-term rental licenses are permitted within the City on a first come first served basis. Please submit the completed application to the **Finance Department (clerks@cityofedwardsville.com or 118 Hillsboro Avenue, Edwardsville, IL 62025)**

Owner/Property Information:

Name of Property Owner(s): _____

Email Address: _____

Property Owner Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Short-Term Rental Address: _____

Parcel Identification Number: _____

Zoning Designation: _____

Short-Term Rental Type:

Type A (Owner-Occupied) Type B (Non-Owner Occupied) *SUP REQUIRED Bed & Breakfast (Owner-Occupied)*SUP REQUIRED

Special Use Permit: Yes - Resolution # _____ No N/A **Maximum # of Guests:** _____

Number of Rental Units : _____ **Number of Off-Street Parking Spaces:** _____

I have received and acknowledge the Short-Term Rental Ordinance and will abide by all requirements. I understand that any violations of these regulations may result in revocation of my short-term rental license and I am subject to all administrative, legal, and equitable remedies available to the city.

Property Owner Signature

Date: _____

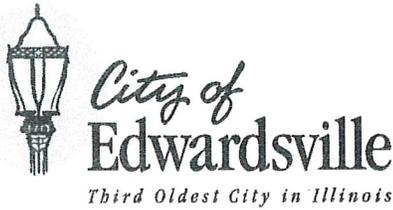
OFFICE USE ONLY:

License Number #: _____ License Issued Date: _____

Planning Staff: _____ Approval Disapproval Date _____

Comments: _____

*If you have any questions about this application, please contact the Planning Division at planning@cityofedwardsville.com or (618)692-7535.



Finance Department
 118 Hillsboro Avenue
 Edwardsville, IL 62025
 (618) 692-7500
 www.cityofedwardsville.com

Business Registration

Please type or print. DO NOT LEAVE ANY SPACE BLANK

IL Dept. of Revenue Sales Tax Number _____ Inception Date _____

Federal Employee Identification Number (FEIN) _____

Business Name _____ Number of employees P/T: _____ F/T: _____

Business Address _____ Sole Proprietor Corporation Partnership Other
 (Circle One)

Business Type _____ Telephone Number () _____

Mailing Address _____ Email _____
 (If different than above) _____

Hours _____

Contact _____

Contact Number () _____

Is this a home based business? Yes No If yes, a Special Use Permit must be filed with the Planning & Zoning Dept.

Any Federal, State or County Licenses or Certificates held _____

Type and location of any toxic, flammable, or hazardous materials stored at location _____

This information is provided to the Edwardsville Police Department for Emergency & Safety Purposes Only

Emergency Contacts (please list the names, address & phone numbers of persons we can contact after hours for emergency purposes)

1)	Title: _____	Home # _____	Day # _____
	City, State _____	Cell # _____	Evening # _____
2)	Title: _____	Home # _____	Day # _____
	City, State _____	Cell # _____	Evening # _____
3)	Title: _____	Home # _____	Day # _____
	City, State _____	Cell # _____	Evening # _____

Does business have a commercial burglar/fire alarm? Yes No Alarm Co. _____

Address _____ Phone # (1st) _____

Phone # (2nd) _____

Alarm Type: (circle all that apply) Silent Burglary Robbery Fire Local Regular Automatic Dialer

Connections to: Residence _____ Alarm Co. _____ Private Security? Yes No _____

Does business have a safe? Yes No Location _____

Additional Information _____

Failure to provide this information to the Finance Department shall result in a penalty of \$35.00 (Ordinance 4877-1-96)



City of
Edwardsville
Third Oldest City in Illinois

Office of the City Clerk
118 Hillsboro Avenue
Edwardsville, IL 62025
(618) 692-7500
www.cityofedwardsville.com

MUNICIPAL TAX RETURN

Please type or print

Business Name & Local Address

Filing Month _____

Federal ID# _____

Corporate Name & Mailing Address

IL Business Tax# _____

Operator's Name _____

HOTEL/MOTEL ROOM TAX (Per Ordinance No. 6638-02-2020)

- | | |
|---|-------|
| 1. Total gross receipts from rental of rooms, Exclusive of an Taxes | _____ |
| 2. Receipts from rooms rented to permanent resident | _____ |
| 3. Receipts from rooms rented to persons (1-2) | _____ |
| 4. Privilege Tax Rate of 9% | X .09 |
| 5. AMOUNT OF HOTEL/MOTEL TAX | _____ |

AMUSEMENT TAX (Per Ordinance No. 5321-6-01)

- | | |
|--|-------|
| 6. Total gross receipts from all fees or charges collected | _____ |
| 7. Privilege Tax Rate of 3% | X .03 |
| 8. AMOUNT OF AMUSEMENT TAX | _____ |
| 9. SUBTOTAL | _____ |
| 10. Penalty of 1½% per month | _____ |
| 11. Failure to File Penalty of 10% per month of tax and interest | _____ |
| TOTAL TAX TO BE REMITTED (add lines 9 through 11) | _____ |

Under Penalties as Provided by Law, I Declare that to the best of my Knowledge and Belief, the information on this form is True, Correct and Complete.

Signature of Taxpayer

Signature of Preparer

Title

Company Name

Date Signed Telephone

Date Prepared Telephone



CITY OF EDWARDSVILLE SHORT TERM RENTAL INSPECTION CHECKLIST

Public Works Department, 200 E Park Street,
Edwardsville, IL 62025 Phone: 618-692-2331
Email: rentalregistration@cityofedwardsville.com
Website: www.cityofedwardsville.com/rental

EXTERIOR/GARAGE
House numbers visible from street (4" tall)
Multifamily unit numbers must be identified on door (4" tall)
Walking surfaces in sound, hazard free condition
Exterior open stairs, landings, porch, deck or other walking surface 30 inches above grade or floor below must have guardrails & balusters with maximum 4 inch spacing.
Structure is maintained in good repair, structurally sound, and sanitary
Accessory Structures (detached garages, sheds, fence & walls) structurally sound and sanitary
Egress doors must be operable from the inside without the use of a key or special knowledge
Light fixture(s) inoperable, missing, or damaged
GFCI protected exterior receptacle(s)
GFCI protected receptacle(s) in garage (including Accessory Structures)
MISCELLANEOUS
Electrical Service box has cover and proper labeling
Free of exposed conductors or components constituting a shock hazard
All fuel-burning appliances shall be properly installed with a shut off valve and maintained
PRV valve and discharge pipe on water heater is properly installed
Interior storage of flammable material is prohibited (propane, gasoline, etc)
GFCI protected at all basement/lower level receptacles
Dedicated outlet at sump pump or grinder pump
Unit free of Rodent/Insect Infestation
Interior open stairs, landings, porch, deck or other walking surface 30 inches above grade or floor below must have guardrails & balusters with maximum 4 inch spacing (interior and exterior)
Light fixture(s) inoperable, missing, or damaged
Receptacle(s) damaged, will not hold plug
Improper use of extension cords, power strips, or multipliers
Habitable spaces have a clear ceiling height of not less than 7 feet
Common Area Smoke alarm operational
Common Area Carbon monoxide detector operational (Required for units with attached garage or gas appliances)
KITCHEN
GFCI protected receptacle(s) along all kitchen countertop(s)
GFCI protection at garbage disposal & dishwasher (all electrical outlets within 6 ft of sink)
All plumbing fixtures shall be maintained in a safe, sanitary and functional condition.
LAUNDRY ROOM
GFCI protection for washing machine & dryer
GFCI outlet at laundry sink or in unfinished area
SLEEPING ROOM(S)
Minimum net clear window opening of 5.7 sq ft (grade floor 5.0 sq ft). Minimum net clear opening height 24 inches / Minimum net clear opening width 20 inches (<i>note: minimum height and width do not equal net clear opening</i>). Must have a minimum of 1 egress able window per sleeping room.
Sill height maximum 44 inches from floor to sill (or as approved during time of construction).
Windows free from glazing cracks, breaks, or holes
Windows easily open able & capable of being held in position
If proposed sleeping room does not have a proper emergency escape and rescue window or exterior egress it CANNOT be used as a bedroom or sleeping room without proper installation of egress window/door. <i>City issued Permit is necessary for window/door installation</i>
Smoke Alarm in rooms used for sleeping purposes (<i>comply in 24 hours</i>)

Smoke Alarm on ceiling or wall within 15 feet of room used for sleeping purposes <i>(comply in 24 hours or prior to occupancy)</i>
Smoke Alarm in each story including basements. <i>(comply in 24 hours or prior to occupancy)</i>
Carbon Monoxide Detector within 15 feet of Sleeping Room(s) and on each floor – Required for all units with attached garage and/or gas appliances. <i>(comply in 24 hours or prior to occupancy)</i>
Properties with Sprinkler Systems – Reports required for routine inspection or testing of existing fire sprinkler systems
BATHROOM(S)
All plumbing fixtures shall be maintained in a safe, sanitary and functional condition.
GFCI protection on receptacle(s)

RESOLUTION NO. 017-05-2025

RESOLUTION REVISING THE FEE SCHEDULE
FOR THE CITY OF EDWARDSVILLE FOR SHORT-TERM RENTALS

WHEREAS, the City of Edwardsville assesses and collects various fees and charges that were either written into the City Code of Ordinances, contained in unified ordinances, or passed by resolution; and

WHEREAS, in 2009 the various fees and charges were consolidated into a uniform Fee Schedule that is kept up to date as fees change by replacing entries as they are repealed or amended by resolution instead of amending the City Code of Ordinances; and

WHEREAS, the Council endeavors to adopt fees that reflect the time and cost associated with processing and reviewing these items.

NOW, THEREFORE BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY COUNCIL OF EDWARDSVILLE, MADISON COUNTY, ILLINOIS, that: the City Council of the City of Edwardsville, Illinois amends and updates the official Fee Schedule for the City of Edwardsville for the following:

<u>Application</u>	<u>Proposed Fee</u>
Short-Term Rental Type A Annual Registration & Initial Inspection	\$50.00
Short-Term Rental Type B Annual Registration & Initial Inspection	\$50.00
Short-Term Rental Bed & Breakfast Annual Registration & Initial Inspection	\$50.00
Short-Term Rental Subsequent Re-Inspection (Type A/Type B/ B&B)	\$75.00

PASSED BY THE CITY COUNCIL OF THE CITY OF EDWARDSVILLE, ILLINOIS, this 5th day of May 2025 pursuant to a roll call vote as follows:

AYES: PATTON, MIRACLE, MORRISON, KRAUSE, WARREN AND GRANT

NAYES:

ABSTENTION:

ABSENT: FARRAR

APPROVED BY THE MAYOR OF THE CITY OF EDWARDSVILLE, ILLINOIS, this 5th day of May 2025.

BY: Art Risavy
Art Risavy, Mayor
City of Edwardsville
Madison County, Illinois

ATTESTED:

Filed in my office this 5th day of May 2025

BY: Michelle A. Boyer
Michelle A. Boyer, City Clerk
City of Edwardsville
Madison County, Illinois