



DEPARTMENT OF COMMUNITY DEVELOPMENT  
**TRANSFER OF OWNERSHIP FOR SHORT TERM RENTAL LICENSE**

*Land of Cheese, Trees and Ocean Breeze*

1510-B Third Street  
Tillamook, Oregon 97141  
Phone: (503) 842-3408

STVR# 851- \_\_\_\_\_ - \_\_\_\_\_

**Rental Location**

Street Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Map & Tax lot Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_  
Name Phone Number

\_\_\_\_\_ Address Email

**TRANSFER INFORMATION:**

TRANSFER FROM: \_\_\_\_\_ TRANSFER TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Documents Attached to Form: \_\_\_\_\_

**BY SIGNING BELOW I HEREBY CERTIFY THAT ALL STATEMENTS CONTAINED HEREIN ALONG WITH EVIDENCE SUBMITTED, ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I HAVE MET AND WILL CONTINUE TO COMPLY WITH THE REQUIREMENTS SET FORTH IN TILLAMOOK COUNTY ORDINANCE #84. I ALSO UNDERSTAND NO ADDITIONAL TRANSFERS ARE ALLOWED.**

\_\_\_\_\_  
Applicant Signature Date Owner of Record Signature Date

Approved by: \_\_\_\_\_ Director, Community Development Date

FOR OFFICIAL USE ONLY

Date \_\_\_\_\_ Fees Pd \_\_\_\_\_ Check/CC \_\_\_\_\_ Rec'd By \_\_\_\_\_  
License # \_\_\_\_\_ TLT # \_\_\_\_\_  
Inspection Date \_\_\_\_\_ By \_\_\_\_\_ Maximum Occupancy \_\_\_\_\_