

Check # 1100

FORM EFFECTIVE MAY 8, 2019



Short Term Rental Annual Registration Form

Louisville Metro Department of Develop Louisville

Registration No.: _____ Intake Staff: _____

Application Fee: \$100.00 (please make checks payable to Planning & Design Services)

A registration shall expire one year from the date it is issued and must be renewed annually. A new registration form must be submitted in order to renew a registration within 30 days of its expiration. A separate registration form is required for each short term rental even if they are located on the same property.

A change in host, ownership, or tenancy of dwelling unit used as a short term rental invalidates any existing registration. The new host, property owner, and/or tenant must apply for a registration in their name(s).

Once complete, please bring or mail the application and supporting documentation to:
Develop Louisville's Office of Planning and Design Services, 444 South 5th Street, Suite 300.
For more information, call (502) 574-6230 or visit <https://louisvilleky.gov/government/planning-design>.

Short Term Rental Property Information:

Physical Address: 1505 R E Breckinridge St

Is the dwelling unit the primary residence of the host? Yes No

If yes, please attach a copy of two of the following documents to this form: driver's license, state identification card; voter registration card; vehicle registration; federal/state tax returns. You may redact any sensitive personal information such as social security numbers.

A primary residence is the main home of an individual. If an individual owns or lives in more than one dwelling unit, then he or she must apply a "facts and circumstances" test to determine if the property is his or her primary residence. (For more information, refer to the definition of primary residence in the Land Development Code)

Was the short term rental approved by a Conditional Use Permit? Yes No

Is the dwelling unit in a single-family residence or duplex? Yes No

Is the dwelling unit in a condominium? Yes No

Zoning of the Property	<u>UN</u>	RECEIVED FEB 27 2023 PLANNING & DESIGN SERVICES
Number of Bedrooms in the Short Term Rental	<u>2</u>	
Number of Off-Street Parking Spaces on the Property	<u>0</u>	
Louisville Metro Revenue Commission Number	[REDACTED]	

Property Owner and Short Term Rental Host Information:

Property Owner:	Short Term Rental Host: <input type="checkbox"/> Check if same as owner
Name: <u>1505 East Breckinridge Street Land Trust</u>	Name: <u>William Thomas Nutt</u>
Company: _____	Company: _____
Address: <u>PO Box 6151</u> <u>Louisville KY 40206</u>	Address: <u>1505 R E Breckinridge St</u> <u>Louisville KY 40204</u>

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City: _____ State: _____ Zip: _____ City: _____ State: _____ Zip: _____
Primary Phone: 502-396-7317 Primary Phone: 502-552-6661
Alternate Phone: 502-354-7773 Alternate Phone: _____
Email: roneburns03@gmail.com Email: _____

Emergency Contact Information:

Contact 1: Check if same as host

Contact 2 (if applicable):

Name: Ron Burns
Company: _____
Address: 3109 Danbury Ct
City: Louisville State: KY Zip: 40241
Primary Phone: 502-396-7317
Alternate Phone: _____
Email: roneburns03@gmail.com

Name: _____
Company: _____
Address: _____
City: _____ State: _____ Zip: _____
Primary Phone: _____
Alternate Phone: _____
Email: _____

Louisville Metro Code requires that a person residing in Jefferson County, KY and/or within 25 miles of the short term rental be responsible for addressing any maintenance issues, safety concern, or nuisance complaints.

Please affirm that the aforementioned emergency contact(s) meets this requirement: Yes No

Applicant/Host Signature (required): [Signature]
Property Owner Signature (required): [Signature], Trustee

Certification Statement: The Certification Statement is only to be filled out in the circumstance that the owner(s) of the subject property is (are) a limited liability company, corporation, partnership, association, trustee, etc. or if someone other than the owner(s) of record sign(s) the application.

I, Eric Feller, in my capacity as trustee, hereby
representative/authorized agent/other

certify that 1505 E Breckenridge Street Land Trust is (are) the owner(s) of the property which
name of LLC / corporation / partnership / association / etc.

is the subject of this application and that I am authorized to sign this application on behalf of the owner(s).
Signature: [Signature] Date: 1/31/23

[Show Absentee Ballot Status](#)

Voter Information

WILLIAM NUTT

1505 E BRECKINRIDGE ST

LOUISVILLE, KY 40204-1709



[Jefferson County Clerk](#)

Legislative Districts / Information

House District: 041

Senate District: 35

Congressional District: 3

US Senators

Precinct Information

PRECINCT 218 41 DISTRICT (L218)

Polling Location

[Find My Polling Place](#)



KENTUCKY^{USA} DRIVER'S LICENSE



1 NUTT
2 WILLIAM T
3 1505R E BRECKINRIDGE ST
4 LOUISVILLE, KY 40204



DOB 10/07/1983
EXP 11/07/2024

4a ISS
02/08/2023