Minneapolis
Community Planning and Economic Development

City of Minneapolis
Licenses and Consumer Services
505 Fourth Ave. S., Room 220
Minneapolis, MN 55415
Telephone: 612-673-2080
www.minneapolismn.gov/businesslicenses

For Office Use Only
Expiration: Nov 1
AP: BLB&L/BLRental
MCO: 351
Adm Issuance: Yes

License Application: Short-Term Rental Hosting Platforms

Definition: A hosting platform provides booking and transaction services through an online website. This allows an owner of a short-term rental property to advertise to potential guests.
A short-term rental property offers overnight accommodations for a fee, in a private residence or a portion of the residence, for 30 days or less.
If you have questions, send an email to businesslicenses@minneapolismn.gov or call 612-673-2080.

1. Application Requirements

1. Complete the application and include all the requirements listed below. Incomplete applications may be returned.
2. There is a fee, plus a new license processing charge, for this application. You can pay by
   - ☐ **Cash:** Drop off your application at our office.
   - ☐ **Check**: Mail or drop off your application at our office.
   - ☐ **Credit Card**: Mail, drop off or email your application to businesslicenses@minneapolismn.gov. ***Do not add your credit card information on this application.*** We will call you to securely charge your credit card.
3. **Personal Information Form** (Form #1)
   This is required for each of the following with a copy of a government issued photo ID attached:
   - ☐ applicant
   - ☐ authorized agent/contact person
   - ☐ the owners, partners, officers, and shareholders who own 25% or more corporate stock; or the three members who own the highest percentage of interest in the company.
4. **Company Structure – Attach the following:**
   - ☐ a list of all online Short-Term Rental Platform Trades Names and
   - ☐ Company Relationship Structure which includes online rental identification domains for each trade name listed above. These records must be updated with the City of Minneapolis when a change is made in your operational structure. Failure to comply indicates your business is operating without a license.
5. **Company Status**
   - ☐ Attach a Certificate of Good Standing from the State of Minnesota Secretary of State Office.

2. Background Information

Applicant Name (Last, First, MI)	**Title**	
Legal Corporate Name	**Trade Name (DBA)**	
Business Address	**Business Telephone Number**	
Minnesota Sales Tax ID Number		
Type of Ownership: ☐ **Corporation** ☐ **LLC** ☐ **Sole Proprietor** ☐ **Partnership** ☐ **Non Profit**	**State of Incorporation**	**Date of Incorporation**
Authorized Agent/Contact Person Name (Last, First, MI)	**Title**	
Email Address	**Telephone**	

The average daily number of dwelling units/rentals listed on your Short-Term Rental Hosting Platform: _____

3. Verification

The City of Minneapolis uses the information on this application to determine qualifications for a license. You are not legally required to provide this information. If you refuse, we cannot approve your application. After we approve your license, all information is public (MN Statutes, Chapter 13).

A signature is required.

__ I have read and agree to the Terms and Conditions for electronic signatures, records and payment.

I, (print name) _____, certify or declare under penalty of perjury under the laws of the State of Minnesota that the information on this application, checklist, and attached documents is true and correct. All information is subject to verification by the State of Minnesota. I understand that false information may result in the denial, suspension or revocation of my business license.

By typing your name, you are electronically signing this application.

Signature of Applicant _____ Title _____ Date _____

4. Additional Information

1. No license will be issued for longer than one year.
2. You cannot transfer your license to any other person or location.
3. For reasonable accommodations or alternative formats, please call us at 612-673-2080 or send an email to businesslicenses@minneapolismn.gov. Individuals who are deaf or hard of hearing can use a relay service by calling 311 at 612-673-3000.
4. Information in other languages: Para asistencia 612-673-2700. Rau kev pab 612-673-2800. Hadii aad Caawimaad u baahantahay 612-673-3500.

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#1

Personal Information Form – Short-Term Rental Hosting Platforms

This form must be completed by each of the following with a copy of driver's license or government issued photo ID attached.

☐ Applicant
☐ Authorized Agent/Contact Person
☐ Owners, Partners, Directors, Officers, and Shareholders who own 25% or more of corporate stock; or the three members who own the highest percentage of interest in the company

I. Background Information

Legal Corporate Name of Business	Trade Name of Business (DBA)		
Business Address	City	State	Zip Code
Your Name (First, Middle, Last)	Your Business Phone Number	Your Cell Phone Number	
Residential Street Address	City	State	Zip Code
Individual Tax Identification Number (ITIN) or Social Security Number (SSN) (Required)	Title		Date of Birth
	Business Email Address		% of ownership
First, middle, or last names you have ever used or been known by:			

II. License History

Have you held a City of Minneapolis Business License? ☐ Yes ☐ No If yes,
Type of License From To

Have you ever had a business license denied or revoked by Minneapolis or any other government entity?
☐ Yes ☐ No If yes, explain.

Have you ever been convicted of any ordinance violation, petty misdemeanor, misdemeanor, gross misdemeanor, or felony? This includes both civil and criminal offenses. This includes state, local, and federal offenses. Do not include parking violations. ☐ Yes ☐ No If yes,
Offense Fine/Penalty City State Date

III. Data Privacy Advisory

The Minnesota Data Practices Act requires us to tell you the following information. As an applicant for a Minneapolis business license, we ask for private and/or confidential information. We use this to check driving history, criminal history, arrest records, warrant information, and other relevant records. You are not legally required to provide this information. If you do not, we cannot complete our investigation or approve your application. The information you provide is public and will be used by the Minneapolis Police Department, License Inspection Unit, the Minneapolis Division of Licenses and Consumer Services, the Minneapolis City Council, and the public. This Authorization for Release of Information will expire two years from the date you signed it.

IV. Verification

The City of Minneapolis uses the information on this application to determine qualifications for a license. You are not legally required to provide this information. If you refuse, we cannot approve your application. After we approve your license, all information is public (MN Statutes, Chapter 13).

A signature is required.

☐ I have read and understand the above Data Privacy Advisory.

☐ I have read and agree to the Terms and Conditions for electronic signatures, records and payment.

I, (print name) _____, certify or declare under penalty of perjury under the laws of the State of Minnesota that the information on this application, checklist, and attached documents is true and correct. All information is subject to verification by the State of Minnesota. I understand that false information may result in the denial, suspension or revocation of my business license.

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Signature of Applicant _____ Title _____ Date _____