2025-2026

Date: _____

2231 Avenida de Mesilla
P.O. Box 10
Mesilla, NM 88046
Phone: (575) 524-3262 Fax: (575) 541-6327

Reg. No.:_____

SHORT TERM RENTAL (STR) REGISTRATION

Note: Any changes to property owner information; additions or alterations to rental units; changes in number or type of rental units; parking; or any other changes to information listed on this form will require a change to the information on file with the Town.

☐ New ☐ Renew ☐ Business License Fee _____ ☐ Registration Fee _____ Parking Fee _____ Total _____
$35 $65

PLEASE PRINT

RENTAL INFORMATION

Name of Rental:_____

Street Address of Unit:_____

Zone: _____ DAC Parcel #: 04-_____ DAC Parcel #: _____

Square Footage of Rental Unit: _____ No. of Bedrooms: _____ No. of Bathrooms: _____

Number of Off-street Parking Spaces: _____

Current New Mexico Revenue Division ID#: _____
(The location code for reporting earnings received in the Town of Mesilla is 07-303.)

All Short-Term-Rentals in Mesilla are also subject to Mesilla Lodger's Tax payable monthly directly to the Town.

PROPERTY OWNER INFORMATION

Name of Owner/Applicant:_____

Mailing Address:_____

City:_____ State:_____ Zip Code:_____

E-Mail Address:_____

Phone #1:_____ Phone #2:_____

Emergency Phone #:_____

Property Owner's Physical Address:

Street _____

City:_____ State:_____ Zip Code:_____

PROPERTY MANAGEMENT/AUTHORIZED RENTAL AGENT

Authorized Rental Agent:_____

Contact/Phone #:_____ E-mail:_____

(Please complete other side.)

EMERGENCY CONTACT INFORMATION

Responsible party to be called in case of emergency. Enter name in order of contact (please print):

24 HOUR EMERGENCY PHONE #: _____

Name	Address	Telephone #
1.		
2.		
3.		

Do you have an alarm system? Yes_____ No _____

What Type? _____

Which Company, if any, Responds to Alarms? _____

Compliance with Fire Codes and Occupancy Requirements: All residential short-term rentals are subject to the applicable fire codes, and occupancy must be reviewed and approved for compliance with the Codes by the Town Fire Chief. An on-site inspection may be required.

APPLICANT HEREBY STATES UNDER OATH THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE TRUE AND VALID.

_____ _____

Signature of Rental Owner Date

_____

Name (Printed)

Office Use

FOR NEW OR MODIFIED RENTALS

PERMISSION ISSUED/DENIED BY: _____ **ISSUE DATE:** _____

NOTES/ISSUES:

_____

_____

_____

CONDITIONS:

_____

_____

_____

_____

Reg. Number: _____ Zone: _____

Renewal Date: _____ Date of Payment: _____