

Vacation Rental Permit PLG-1 & Renewal Application Form Page 1 of Page 1 of

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This application is for submittal of a **new vacation rental permit OR for the renewal of an existing vacation rental permit.** Please carefully read the List of Required Information (LORI) and ensure that ALL required information is included with this application. If you do not have ALL of the required information, your application will not be accepted. Note that vacation rental permits are not allowed on properties developed with an Accessory Dwelling Unit (ADU).

List of Required Information (LORI)

Submit the following:

- Completed Application Form PLG-150 (attached) Be sure to include the owner-agent form (PLG-210, available <u>here</u>), if needed, and completed rental safety certification.
- 2. <u>Plans</u> All NEW vacation rental applications require plans.

RENEWALS require plans if:

- There has been an increase in the number of bedrooms, or
- There has been a decrease in the number or size of parking spaces, and
- The vacation rental permit has not already been amended to approve the changes.

One (1) Set of Plans (if the plan size exceeds 11 x 17, one 8.5" by 11" set also required). Plans must include:

- Assessor's Parcel Number on every sheet.
- Name, address, phone numbers, and e-mail address of applicant, plan preparer, and owners.
- Scale and north arrow on every sheet. Preferred scale is ¼ inch = one foot. Other scales may be appropriate but must be approved by Planning staff before submitting application.
- Date of preparation on every sheet.
- <u>Site Plan</u> (refer to *Measuring your Vacation Rental and Drawing Scaled Plans* handout, available <u>here</u>) Where is this handout?
 - Location and dimensions of all property lines, drawn to scale and labeled.
 - Location and dimensions of all rights-of-way, vehicular easements, and edge of pavement, all labeled.
 - Location and dimensions of driveways and parking spaces (minimum dimensions 8.5 feet x 18 feet).
 - · Location of all existing buildings.
- <u>Floor Plan</u> (refer to *Measuring your Vacation Rental and Drawing Scaled Plans* handout, available <u>here</u>) Where is this handout?
 - Show and label all rooms, drawn to scale, including windows and doors

• Parking Plan

- One (1) and Two (2) bedroom units one on-site parking space is required.
- Three (3) or more bedroom units <u>two</u> on-site parking spaces *are required*.
- **Guests must use street parking for the off-site vehicle in the vicinity of the vacation rental but will not have any exclusive or assigned use of any available street parking. Should off-site parking occur within a parking district, the vacation rental permit holder will be required to purchase a parking permit at the business rate and will not be eligible for residential parking permit allocations.
- ***In situations where the required on-site parking cannot be provided, an on-site parking exception may be requested in conjunction with a Level V Vacation Rental Permit Application, for consideration



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by the Zoning Administrator at a public hearing, who shall make the following finding in conjunction with approval of the parking exception: Existing traffic and parking on nearby streets and properties would not be adversely affected by granting of an on-site parking reduction, as off-site parking is typically available and not subject to significant levels of congestion. Contact Planning staff for more information at: Planning.ZoningInfo@santacruzcountyca.gov.

- **3.** <u>Copy of Current Rental/Lease Agreement</u>. Please indicate on the rental/lease agreement where the following information is stated:
 - The maximum number of guests that are allowed (2 per bedroom + 2 additional; children under 8 not counted).
 - The maximum number of people that are allowed for celebrations and gatherings between 8:00 a.m. and 10:00 p.m. (no more than twice the maximum number of guests allowed).
 - The maximum number of vehicles allowed (the number of required on-site parking spaces (one space for 1- and 2-bedroom units and two for 3+ bedroom units, plus one non-exclusive on street where available).
 - Information regarding limitations on noise (quiet hours between 10:00 p.m. and 8:00 a.m.).
 - Trash management (trash must be kept in closed containers and not allowed to accumulate).
 - Prohibition on illegal behavior including an explicit prohibition of ANY fireworks.
- **4.** Proof of Transient Occupancy Tax Registration (NEW) or Payment (RENEWALS). This may be obtained from the Treasurer-Tax Collector, located on the first floor of the County Building at 701 Ocean Street, Santa Cruz CA. Please contact that office at (831) 454-2510; NEW applications require TOT payment registration. A stamped registration form is required to prove registration. Applications for RENEWAL require proof of TOT payment and use of Vacation Rental. Please include a summary of the dates of use as a vacation rental. NOTE: You must show significant rental use of the unit for three of the previous five (5) years. Proof of significant rental use is not required from 2020-2022 due to the County mandated moratorium on short term rentals related to the COVID pandemic.
- **5.** Name, address, and telephone number(s) of the local contact person, who must be located within a 30-mile radius of the rental and be available 24 hours a day.
- **6.** Written agreement(s) signed by record owner(s) of any attached dwelling unit(s) stating that they are aware of the proposed vacation rental use and have no objection to issuance of a permit for such use.
- 7. For RENEWALS, a photograph of the sign as installed on the parcel as required by County code. The sign must include the 24-hour contact information, permit # and permit expiration date (if applicable).
- **8. For RENEWALS:** Has the subject property changed ownership in the past five years? If yes, you are ineligible for a Renewal Permit. Please proceed with application for a new Vacation Rental Permit. If not, you may proceed with filing a Renewal Permit Application.



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Permit and Property Information		
Permit No. (if application is for a renewal):		
Assessor's Parcel Number*:		
Street Address:		
Transient Occupancy Tax Registration Number: _		
Number of bedrooms to be rented:		
*Assessor's Parcel Numbers (APNs) may be o	obtained from the Assessor's Office a	at 831-454-2002.
Owner Information		
Name:		
Mailing Address:		
City:	_ State:	Zip Code:
Phone No.:	_ Email:	
Applicant Information (if different than owner in	nformation)	
Name:		
Mailing Address:		
City:	State:	_ Zip Code:
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NOTE: If the application submittal is made by anyone other than the owner, a signed Owner/Agent form (available \underline{here}) or a property management agreement \underline{must} be submitted with the application.



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24-Hour Contact

NOTE: The 2	4-hour contact must reside within a 30-i	mile radius of the vacation rental.
ame:		
		Zip Code:
	nty Employee Information Publication	
y sections 6254.21 or 6254.24 ontact person and constitute erson's name and phone num pove is an employee of the lanual, this application must bection, and it constitutes writ	of the California Government Code, the swritten permission under Governme ber may be placed on the County's internation of Santa Cruz within the scope signed below by the contact person, it is signed by the contact person.	(including a public safety official) as defined is application must be signed below by the ent Code section 6254.21 that the contact net website. If the contact person identified of section 468 of the County Procedures constitutes a waiver of the provisions of that erson's name and phone number on the
ection, and it constitutes writ ounty's internet website.	ten permission to place the contact p	erson's name and phone number on t
Contact person signat	ure, if applicable	Date



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Rental Safety Certification

The following items require verification to assure the rental is equipped and maintained to minimum safety standards to help
provide for a safe vacation experience. Verification can be performed by owner (self-certified), certified home inspector,
County Building Inspector, or by the property manager/agent.

provide 1	for a safe vacation experience. Verification Building Inspector, or by the property mana	n can be performed by owner	· · · · · · · · · · · · · · · · · · ·	
	building code requirements.In each sleeping room.Outside each separate sleeping area	the State Fire Marshall) installed in the following locations per the current ea in the immediate vicinity of the bedroom(s). Including basements and habitable attics.		
	building code requirements.Outside each separate sleeping area	in the immediate vicinity of the	alled in the following locations per the current bedroom(s). e attics but not including crawl spaces or	
	- ·-	g GFCI's (ground fault circuit interrupters) required at all receptacles within 6 feet of all kitchen, bathroom, bar dry sinks per the current electrical code requirements.		
	All sleeping rooms shall be provided with at least one emergency egress window with a minimum net clear opening of 5 square feet, with a minimum opening height of 24 inches and minimum net clear opening width of 20 inches, with the bottom of the clear opening being not greater than 44" measured from the floor. Bars, grilles, grates, or similar devices are permitted to be placed over emergency escape and rescue openings provided such devices are releasable or removable from the inside without the use of a key, tool, or special knowledge. Per current building code requirements.			
	All stairs shall have at least one continuo requirements.	us handrail running the full leng	gth of the stairs per current building code	
		all have guard railing a minimur quirements. Exception: Guards c	n of 42" in height with openings no greater on the open sides of stairs shall have a height	
	Pool/spa safety barrier enclosures shall spas/ hot tubs with approved safety cover		Code, Sec. 12.10.216. Exception: Self-contained rrequirements	
	Rental equipped with at least one fire ex the kitchen.	tinguisher (type 2A10BC) install	led in a readily visible/accessible location near	
-	certify that the safety standard conditions tioning condition. Form must be signed by			
Owner of Re	ental Unit		Date	
Certified Ho	ome Inspector	License #	Date	
County Build	ding Inspector		Date	
Property Ma	anager/ Agent		Date	



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Applicant's Signature

I certify that I am the applicant and that the information submitted with this application is true and accurate to the best of my knowledge and belief. I understand that the County of Santa Cruz is not responsible for inaccuracies in information presented, and that inaccuracies may result in the revocation of planning permits as determined by the Planning Director.

I certify that, to the best of my knowledge, the bedroom(s) associated with this hosted rental are legal and suitable for human occupancy.

I understand that hosted rentals are for bedrooms in the primary dwelling unit and are not permitted in accessory structures (including ADU's), legally restricted affordable housing units, balconies, sheds or porches, RV's, or tents.

I further certify that I am the owner or purchaser (or option holder) of the property involved in this application, or the lessee or agent fully authorized by the owner to make this submission, and that proof of such is on file with the Zoning Section.

I further certify that there are no restrictions against short term rentals associated with the subject property, including, but not limited to, Homeowner's Association regulations, and I understand that any permit issued will be rendered void if there are restrictions on the subject property.

I understand that the County of Santa Cruz has attempted to request everything necessary for an accurate and complete review of my proposal; however, after Planning staff has taken in the application and reviewed it further, it may be necessary to request additional information and clarification.

Signature of Owner or Authorized Agent	Date	