COUNTY OF SANTA CRUZ

PLANNING DEPARTMENT
701 OCEAN STREET, 4TH FLOOR, SANTA CRUZ, CA 95060
(831) 454-2580 FAX: (831) 454-2131 TDD: (831) 454-2123
KATHLEEN MOLLOY PREVISICH, PLANNING DIRECTOR

NEW Vacation Rental Permit Application

Carefully read the List of Required Information (LORI) on page 6 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.

Property Information

ASSESSOR'S PARCEL NUMBER (APN): _____

(APNS MAY BE OBTAINED FROM THE ASSESSOR'S OFFICE AT (831) 454-2002)

STREET ADDRESS: _____

CITY: _____

Applicant Information

NAME (IF DIFFERENT FROM OWNER): _____

MAILING ADDRESS: _____

CITY/STATE_____ ZIP _____

PHONE NO.(_____)_____ CELL NO.(_____)_____

FAX NO. (_____)_____

EMAIL: _____

Owner Information

NAME: _____

MAILING ADDRESS: _____

CITY/STATE_____ ZIP _____

PHONE NO.(_____)_____ CELL NO.(_____)_____

FAX NO. (_____)_____

EMAIL: _____

NOTE:

If the application submittal is made by anyone other than the owner, a signed Owner/Agent form (attached) or a property management agreement must be submitted with the application.

24-HOUR CONTACT

NAME: _____

MAILING ADDRESS: _____

CITY/STATE_____ ZIP _____

PHONE NO.(_____)_____ CELL NO.(_____)_____

FAX NO. (_____)_____

EMAIL: _____

VACATION RENTAL SAFETY CERTIFICATION

The following items require verification to assure the vacation rental unit 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. All items must be checked with form signed and dated.

☐ **Smoke alarms** (listed and approved by the State Fire Marshall) installed in the following locations per the 2010 California Residential Code, Sec. R314.1.

- In each sleeping room.
- Outside each separate sleeping area in the immediate vicinity of the bedroom(s).
- At least one alarm on each story, including basements and habitable attics.

☐ **Carbon Monoxide alarms** (listed by an approved agency such as UL) installed in the following locations per the 2010 California Residential Code, Sec. R315.1.

- Outside each separate sleeping area in the immediate vicinity of the bedroom(s).
- At least one alarm on each story, including basements and habitable attics but not including crawl spaces or uninhabitable attics.

☐ Working **GFCI's** (ground fault circuit interrupters) required at all receptacles within 6 feet of all kitchen, bathroom, bar and laundry sinks per 1987 National Electrical Code, Art. 210-8.

☐ 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. 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.

☐ All stairs shall have at least one continuous **handrail** running the full length of the stairs.

☐ All walking surfaces measured vertically more than 30" above grade or other floor levels, including mezzanines, platforms, stairs, ramps and landings shall have **guard railing** a minimum of 36" in height with openings no greater than 6" for older homes, and 4" for homes built after 1991.

- ☐ **Pool/spa safety barrier** enclosures shall comply with Santa Cruz County Code, Sec. 12.10.216.
  Exception: Self-contained spas or hot tubs with listed/approved safety covers need not comply with barrier requirements.

- ☐ Rental equipped with at least one **fire extinguisher** (type 2A10BC) installed in a readily visible/accessible location near the kitchen.

I herby certify that the safety standard conditions listed above are fully complied with and will be maintained in a useable and functioning condition. Form must be signed by one of the following four parties.

_____		_____
Owner of Rental Unit		Date
_____	_____	_____
Certified Home Inspector	License #	Date
_____		_____
County Building Inspector		Date
_____		_____
Property Manager/Agent		Date

For questions regarding these inspection requirements please contact Tony Falcone at (831) 454-3195

OWNER-AGENT APPROVAL FORM

For persons other than the owner who wish to obtain a building, development, and/or other permit, the approval of the owner is required.

This is the County's authorization to issue a permit to the agent listed below:

Agent: Name: _____

Address: _____

City: _____

State/Zip Code: _____

Telephone: _(_____)_____

Owner: Name: _____

Address: _____

City: _____

State/Zip Code: _____

Telephone: _(_____)_____

_____ _____

Date Signature of Owner

_____ _____

Assessor's Parcel Number(s) Project Location

Note: One Owner-Agent form will be required for each permit required. In the case where there is more than one owner of a parcel, the owner signing this form represents that he/ she has the consent from all other owners of the parcel. By signing this form, the owner is authorizing the agent to legally bind the owner to responsibility for payment of the County's cost for all actions related to noncompliance with permit conditions. The agent will be required to provide proof of service, by mail, to the owner of a copy of the executed acceptance of permit conditions.

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

I understand that if this application will require a public hearing pursuant to County Code Section 13.10.694(d)(2), the application will be converted to an "at cost" application and I will be required to sign a contract and be billed for staff time associated with processing the application as provided in County Code Section 13.10.694(d)(2)(C)(ii).

_____ _____

Signature of Owner or Authorized Agent **Date**

Do not write below this line on this page

RECEIPT

NEW Vacation Rental Permit Application

To be completed by staff

Check Number:_____ Amount:_____

(Contact Zoning Staff for current fees)

ANY REFUNDS WILL BE MADE TO WHOMEVER MADE THE PAYMENT

IF THIS APPLICATION REQUIRES A PUBLIC HEARING, IT WILL BE CONVERTED TO AN "AT COST" PROJECT AND YOU WILL BE BILLED FOR STAFF TIME ASSOCIATED WITH PROCESSING THE APPLICATION

APN: _____ Application Number: _____

_____ _____

Intake Staff Signature Date

LIST OF REQUIRED INFORMATION FOR *NEW* VACATION RENTALS

Submitted materials must include the following:

- ☐ **Completed application form.** Be sure to include owner agent form, if needed, and completed Vacation Rental Safety Certification.

- ☐ **One (1)** Set of Plans. If comprising multiple sheets, plans shall be stapled together with site plan on top, and folded **to no more than 8.5 inches x 11 inches**. **Plans must include the following:**
  - ☐ Assessor's Parcel Number on every sheet.
  - ☐ Name, address, phone, fax and cell 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.

  - ☐ **Site Plan** (refer to *Measuring your Vacation Rental and Drawing Scaled Plans* 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.

  - ☐ **Floor Plan** (refer to *Measuring your Vacation Rental and Drawing Scaled Plans* handout)
    - ☐ Show all rooms, drawn to scale, including windows and doors
    - ☐ Label all rooms

- ☐ **Name, address, and telephone number(s) of the local contact person.** Must be located within a 30 mile radius of the rental and be available 24 hours a day; may be the property owner, if within 30 miles and available 24 hours a day.

- ☐ **Copy of rental/lease agreement.** Please indicate on the rental/lease agreement where the following information is stated:
  - ☐ The maximum number of guests that are allowed (calculate: 2/bedroom +2 additional; children under 12 not counted (County Code section 13.10.694(d)(1)(D)).
  - ☐ The maximum number of people that are allowed for celebrations and gatherings between 8:00 a.m. and 10:00 p.m. (calculate: twice the maximum number of guests allowed (County Code Section 13.10.694(d)(1)(D)).
  - ☐ The maximum number of vehicles that are allowed (calculate: the number of existing on-site parking spaces, plus two (County Code Section 13.10.694(d)(1)(D)).
  - ☐ Information regarding limitations on noise (quiet hours between 10:00 p.m. and 8:00 a.m.(County Code Section 8.30.010)), trash management (trash must be kept in closed containers and not allowed to accumulate (County Code Section 7.20.005, et seq.)), and prohibition on illegal behavior .

- ☐ **Transient Occupancy Tax Registration Certificate.** For information about registering to pay Transient Occupancy Tax, contact the Treasurer-Tax Collector at (831) 454-2510 or TTC.WEBMAIL@co.santa-cruz.ca.us. Registration for and payment of Transient Occupancy Tax is required by County Code Section 4.24.010 et seq.