

# COUNTY OF SANTA CRUZ

#### PLANNING DEPARTMENT

701 OCEAN STREET, 4<sup>TH</sup> FLOOR, SANTA CRUZ, CA 95060 (831) 454-2580 FAX: (831) 454-2131

## **Hosted Rental Permit Application**

This application and information is for hosted rental permits. A hosted rental is a dwelling unit, where a long-term resident acting as a host occupies one bedroom in a dwelling unit while one or two legal bedrooms are rented for the purpose of overnight lodging for a period of less than 30 days. For renting an entire property for 30 days or less, please refer the Vacation Rental application and ordinance.

## **List of Required Information (LORI)**

If you do not have ALL of the required information, your application will not be accepted.

<u>Completed Application Form</u> Be sure to include the attached owner-agent form, if needed, and completed rental safety certification.

#### **Proof of Transient Occupancy Tax (TOT) Payment**

- Existing Hosted Rentals will need to provide evidence of TOT payment prior to December 5, 2017.
- Applications for New Hosted Rentals cannot be accepted until September 18, 2018 and must include evidence of registration to pay TOT.
- If Airbnb is used to book your rental, TOT is automatically paid for you and you do not need to provide a TOT number. However, receipts from Airbnb demonstrating the use of the dwelling as a rental prior to December 5, 2017 are required.

<u>Copy of Rental/Lease Agreement</u> A rental agreement, lease agreement, or "house rules" for your guests is required. Please provide a copy of this document and indicate where the following information is stated:

- The maximum number of guests that are allowed (3 per bedroom; 2 bedrooms maximum; children under 8 not counted; rental to unaccompanied minors under the age of 18 is prohibited).
- The maximum number of vehicles allowed is 1 per bedroom.
- Information regarding limitations on noise (quiet hours between 10:00 p.m. and 8:00 a.m.).
- Pets, if allowed by owner, shall be secured on the property at all times. Continual nuisance barking by unattended pets is prohibited.
- Weddings, outdoor parties, or similar activities are prohibited.
- 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.
- Emergency evacuation instructions.
- No cooking shall be allowed in any guest room or in any bathroom.

## **Hosted Rental Application**

### **Permit and Property Information**

Assessor's Parcel Number (APN):	
,	(APNs may be obtained from the Assessor's Office at 831-454-2002)
Transient Occupancy Tax Registra *Note: If you use AirBNB to manage your pays your transient occupancy tax.	tion Number:rental, you will not need to provide a registration number as AirBNB
Number of bedrooms to be rented:	
Owner Information	
Name:	
Mailing Address:	
City/State:	ZIP
Phone No.()	Cell Phone No. ()
Email:	
Applicant Information (Complete	only if different from Owner Information)
Name:	
Mailing Address:	
City/State:	ZIP
Phone No.()	Cell Phone 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 <u>must</u> be submitted with the application.

#### 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. ☐ Smoke alarms (listed and approved by the State Fire Marshall) installed in the following locations per the 2016 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 2016 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 the 2016 California 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, 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 the 2016 California Residential Code, Sec. R310. ☐ All stairs shall have at least one continuous **handrail** running the full length of the stairs per the 2016 California Residential Code, Sec. R311.7.8 ☐ 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 42" in height with openings no greater than 4" per the 2016 California Residential Code, Sec. R312.1. Exception: Guards on the open sides of stairs shall have a height not less than 34" measured vertically from a line connecting the leading edges of the treads. □ Pool/spa safety barrier enclosures shall comply with Santa Cruz County Code, Sec. 12.10.216. Exception: Self-contained spas/ hot tubs with 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 hereby 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

Date

Date

County Building Inspector

Property Manager/Agent

### **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.

I understand that if this application will require a public hearing pursuant to County Code Section 13.10.694(D)(3), 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)(3)(b)(ii).

Signature of Owner or Authorized Agent	Date

## 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:

Address:City, State, Zip Code:Cell #: ()	Agent:	name:	
City, State, Zip Code: Cell #: ()  Telephone: () Cell #: ()  Owner: Name: Address: City, State, Zip Code: Telephone: () Cell #: ()  Date Signature of Owner		Address:	
Owner:         Name:           Address:			
Address: City, State, Zip Code: Cell #: ()  Date  Signature of Owner		Telephone: ()	Cell #: ()
City, State, Zip Code:	Owner:	Name:	
City, State, Zip Code:		Address:	
Date Signature of Owner			
Date Signature of Owner		Telephone: ()	Cell #: ()
Date Signature of Owner			
<del></del>			Signature of Owner
Assessor's Parcel Number(s)  Project Location	Δερερο	r's Parcel Number(s)	Project Location