



This application and information are for submittal of a hosted rental **permit renewal**. To apply for a new hosted rental permit, please use the Hosted Rental Permit Application form. A hosted rental is a short-term rental (less than 30 days) within a legal dwelling unit, where a long-term resident acting as a host occupies one bedroom in the dwelling unit while one or two legal bedrooms are rented for the purpose of overnight lodging for a period of less than 30 days. To rent an entire property for 30 days or less, please refer to 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.

1. **Completed Application Form - PLG-160 (attached)** Be sure to include the linked owner-agent form (PLG-210 available [here](#)), if needed, and completed rental safety certification.
2. **Transient Occupancy Tax Payment** Proof of payment of transient occupancy tax (or, alternatively, proof of registry with a verified online platform). Proof of payment of transient occupancy tax 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 call (831)-454-2510 or email [ttcwebmail@santacruzcounty.us](mailto:ttcwebmail@santacruzcounty.us).
3. **Proof of Significant Use** A summary of the dates the unit was used as a hosted rental, between the time of issuance of the existing permit and the date of application for the renewal, is required. Renewal applications must show significant rental use for three out of the previous five years. Significant rental use shall be interpreted to include no fewer than 10 percent of weekend nights in a given year, or a minimum occupancy of five weekends or 10 nights per calendar year. Please note, proof of significant use between the years 2020 and 2022 is waived due to County imposed rental restrictions associated with the COVID pandemic.



**Permit and Property Information**

Previous Hosted Rental Application Number: \_\_\_\_\_

Assessor's Parcel Number\*: \_\_\_\_\_

Street Address: \_\_\_\_\_

Transient Occupancy Tax Registration Number: \_\_\_\_\_

Number of bedrooms to be rented: \_\_\_\_\_

**Owner Information**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

**Applicant Information (if different from owner)**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

\*Assessor's Parcel Numbers (APNs) may be obtained from the Assessor's Office at 831-454-2002.

**NOTE: If the application submittal is made by anyone other than the owner, a signed Owner/Agent form (available [here](#)) or a property management agreement must 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 current building code requirements.
  - 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 current building code requirements.
  - 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 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 the current building code requirements.
- All stairs shall have at least one continuous **handrail** running the full length of the stairs per the current building code requirements.
- 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 current building code requirements. 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

\_\_\_\_\_  
 County Building Inspector

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Property Manager/ Agent

\_\_\_\_\_  
 Date



**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