

EXHIBIT 'A'
NUISANCE RESPONSE PLAN

In accordance with SMBC Sec. 6.455.060 the following nuisance response plan is submitted. A letter will be mailed to the occupant and/or owner of properties located within a 300-foot radius of the vacation rental advising of its use and a copy of this Nuisance Response Plan will be placed on the city's Internet web site for public access.

PROPERTY ADDRESS: 1016 Bangor lane

APN# (if known): _____

PROPERTY OWNER(S) (if more than two owners, use an additional sheet of paper)

Name: Gary Wikholm

Mailing Address: 1512 Menta Lane

Camarillo, Ca Zip 93010

Contact Telephone: (805) 388-3877 (805) 444-0181

Name: Sylvia + Duane Wikholm

Mailing Address: 386 San Francisco St

Ventura, Ca Zip 93004

Contact Telephone: (805) 647-3434 () _____

NUISANCE COMPLAINT CONTACTS:

The following person(s) will be available by telephone, and will be responsible for promptly responding to a nuisance complaint arising out of the occupancy of the short term rentals by tenants, their visitors and/or guests. A return telephone call to a complainant within forty-five (45) minutes of the initial complaint shall be deemed "prompt."

No more than a total of THREE persons can be designated and only ONE can be designated during any particular period of time.

THERE MUST BE A DESIGNATED CONTACT PERSON 24 HOURS PER DAY, 7 DAYS PER WEEK. BELOW IS THE CONTACT INFORMATION FOR THE DAYS AND TIMES OF EACH DAY.

(Please use pen or type).

CONTACT NO. 1

DAY/TIME DESIGNATION

24 HOURS PER DAY, 7 DAYS PER WEEK or,

F/ _____ Sa/ _____ Su/ _____
M/ _____ Tu/ _____ W/ _____
Th/ _____

CONTACT NAME:

Gary or Nancy Wikholm

CONTACT ADDRESS:

1512 menta lane, Camarillo ca 93010

Telephone No. 1: (805) 388-3877 Telephone No. 2: (805) 444-0181

Telephone No. 3: (805) 701-3495

CONTACT NO. 2

DAY/TIME DESIGNATION

24 HOURS PER DAY, 7 DAYS PER WEEK or,

F/ _____ Sa/ _____ Su/ _____
M/ _____ Tu/ _____ W/ _____
Th/ _____

CONTACT NAME:

Sylvia and Duane Wikholm

CONTACT ADDRESS:

386 San Francisco St, Ventura ca 93004

Telephone No. 1: (805) 647-3434 Telephone No. 2: _____

Telephone No. 3: _____

CONTACT NO. 3

DAY/TIME DESIGNATION

24 HOURS PER DAY, 7 DAYS PER WEEK or,

F/ _____ Sa/ _____ Su/ _____
M/ _____ Tu/ _____ W/ _____
Th/ _____

CONTACT NAME:

CONTACT ADDRESS:

Telephone No. 1: _____ Telephone No. 2: _____

Telephone No. 3: _____