

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: 140 N. Katherine Dr. Ventura CA 93003

APN# (if known): _____

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

Name: William ASA Kohler / Jamie M. Kohler

Mailing Address: same

Contact Telephone: (805) 415-9749 (805) 207-2496
Zip _____

Name: _____

Mailing Address: _____

Zip _____

Contact Telephone: () _____ () _____

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/ 0000-1700 Sa/ 0000-1700 Su/ 0000-1700
M/ 0000-1700 Tu/ 0000-1700 W/ 0000-1700
Th/ 0000-1700

CONTACT NAME:

Jamie Kohler

CONTACT ADDRESS:

140 N. Katherine Dr. Ventura 93003

Telephone No. 1: 805)415-9749 Telephone No. 2: _____

Telephone No. 3: _____

CONTACT NO. 2

DAY/TIME DESIGNATION

24 HOURS PER DAY, 7 DAYS PER WEEK or,

F/ 1700-0000 Sa/ 1700-0000 Su/ 1700-0000
M/ 1700-0000 Tu/ 1700-0000 W/ 1700-0000
Th/ 1700-0000

CONTACT NAME:

William (Billy) Kohler

CONTACT ADDRESS:

140 N. Katherine Dr. Ventura 93003

Telephone No. 1: 805)207-2496 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: _____