

EXHIBIT 'A'
NUISANCE RESPONSE PLAN

Permit Number: 2256

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: 2727 Poli St Ventura 93003

APN# (if known): _____

PROPERTY OWNER(S)

List all Owners on the Deed. If more than two, use an additional sheet of paper.

Owner Name: Steve Logan

Mailing Address: 2727 Poli St
Ventura CA 93003

Contact Telephone: (905) 340-0902 ()

Steve Logan 6-25-16
Owner Signature Date

Owner Name: Patricia Logan

Mailing Address: 2727 Poli St
Ventura CA 93003

Contact Telephone: (905) 407-5890 ()

Patricia Logan 6-25-16
Owner Signature Date

Maximum Number of Overnight Occupants: 6

Number of Off Street Parking Spaces: 6

Number of Bedrooms available: 3

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.

NUISANCE RESPONSE CONTACTS

THERE MUST BE A DESIGNATED CONTACT PERSON 24 HOURS PER DAY, 7 DAYS PER WEEK.

CONTACT NO. 1

DAY & TIME DESIGNATION

24 HOURS PER DAY, 7 DAYS PER WEEK or,

F/ _____ Sa/ _____ Su/ _____

M/ _____ Tu/ _____ W/ _____

Th/ _____

CONTACT NAME:

Patricia Logan

CONTACT ADDRESS:

2727 Pop Vln

Telephone No. 1:

905-407-5890

Telephone No. 2:

905-340-0902

Telephone No. 3:

CONTACT NO. 2

DAY & TIME DESIGNATION

24 HOURS PER DAY, 7 DAYS PER WEEK or,

F/ _____ Sa/ _____ Su/ _____

M/ _____ Tu/ _____ W/ _____

Th/ _____

CONTACT NAME:

Steve Logan

CONTACT ADDRESS:

Telephone No. 1:

905-340-0902

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:

Submitted By:

Patricia Logan

Date:

6-25-16