

EXHIBIT 'A' NUISANCE RESPONSE PLAN

Permit Number: 2265

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: 1323 WEYMOUTH LANE

APN# (if known): _____

PROPERTY OWNER(S)

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

Owner Name: RON HUBACH

Mailing Address: 7600 BERNE CT.

RIVERSIDE, CA 92506

Contact Telephone: (951) 688.0029 (310) 426.0262

Owner Signature Date

Owner Name: KATIE HUBACH

Mailing Address: 7600 BERNE CT

RIVERSIDE CA 92506

Contact Telephone: (951) 688.0029 (951) 310.0500

Katie H 8/14/16
Owner Signature Date

Maximum Number of Overnight Occupants: 8

Number of Off Street Parking Spaces: 4

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: Turnkey Vacation Rentals

CONTACT ADDRESS: _____

Telephone No. 1: 855.582.6558 Telephone No. 2: _____

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: Turnkey Vacation Rentals

CONTACT ADDRESS: _____

Telephone No. 1: 888-512-0498 ext. 1 Telephone No. 2: _____

Telephone No. 3: _____

CONTACT NO. 3

DAY & TIME DESIGNATION

24 HOURS PER DAY, 7 DAYS PER WEEK or,

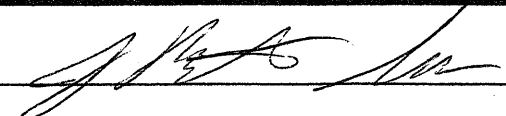
F/ _____ Sa/ _____ Su/ _____
M/ _____ Tu/ _____ W/ _____
Th/ _____

CONTACT NAME: _____

CONTACT ADDRESS: _____

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

Telephone No. 3: _____

Submitted By:  Date: Feb 18, 2018