

**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: 1071 DOVER LANE, VENTURA, CA 93004

APN# (if known): \_\_\_\_\_

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

Name: JEFFREY & ARIELLE BASES

Mailing Address: 70348 ALERION PL.

WOODLAND HILLS CA Zip 91364

Contact Telephone: (818) 346-7704 (818) 370-6329

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/ \_\_\_\_\_ Sa/ \_\_\_\_\_ Su/ \_\_\_\_\_

M/ \_\_\_\_\_ Tu/ \_\_\_\_\_ W/ \_\_\_\_\_

Th/ \_\_\_\_\_

**CONTACT NAME:**

JEFFREY BASES

**CONTACT ADDRESS:**

20348 ALERION PL. WOODLAND HILLS, CA 91364

Telephone No. 1: (818) 370-6339 Telephone No. 2: (818) 346-7704

Telephone No. 3: (818) 384-1198

**CONTACT NO. 2**

**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: \_\_\_\_\_

**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: \_\_\_\_\_