



**City of Goleta
Nuisance Response Plan (Exhibit A)**
130 Cremona Drive, Suite B • Goleta, CA 93117

Phone: (805) 961-7500 • Fax (805) 685-2635 • Email: businesslicense@cityofgoleta.org

In accordance with Goleta Municipal Code Sec. 5.08.060 the following nuisance response plan is submitted. A letter has been mailed to the occupant and/or owner of properties located within a 200-foot radius of the vacation rental advising of its use. A copy of this Nuisance Response Plan will be placed on the City's website for public access.

IF APPLICABLE, SHORT TERM VACATION RENTAL # SHR0001 NEW RENTAL AMENDMENT OF NUISANCE RESPONSE PLAN

1	PROPERTY ADDRESS <u>329 Pebble Beach Dr.</u>	CITY <u>Goleta</u>	STATE <u>CA</u>	ZIP CODE <u>93117</u>
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2	OWNER NAME (IF MORE THAN TWO, USE AN ADDITIONAL SHEET OF PAPER) <u>Sabrina Cruz</u>	3	PHONE <u>805 886 0426</u>
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4	MAILING ADDRESS <u>same</u>	CITY	STATE	ZIP CODE
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5	OPTIONAL SECOND OWNER NAME _____	6	PHONE
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7	MAILING ADDRESS _____	CITY	STATE	ZIP CODE
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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 thirty (30) 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.

CONTACT NO. 1

8	DAY/TIME DESIGNATION	<input checked="" type="checkbox"/> 24 HOURS PER DAY, 7 DAYS PER WEEK OR:					
	SU	M	TU	W	TH	F	SA
9	CONTACT NAME <u>Sabrina Cruz</u>						
10	CONTACT ADDRESS <u>same</u>						
11	PHONE 1 <u>805 886 0426</u>			12 PHONE 2			

CONTACT NO. 2

13	DAY/TIME DESIGNATION	<input type="checkbox"/> 24 HOURS PER DAY, 7 DAYS PER WEEK OR:					
	SU	M <u>9-6</u>	TU <u>9-6</u>	W <u>9-6</u>	TH <u>9-6</u>	F <u>9-6</u>	SA
14	CONTACT NAME <u>Marie Meng</u>						
15	CONTACT ADDRESS <u>32410 McCaw Ave #211</u>						
		CITY <u>SB</u>		STATE <u>CA</u>		ZIP CODE <u>93105</u>	
16	PHONE 1 <u>805 637 7571</u>			17 PHONE 2 <u>805 898 9565</u>			

CONTACT NO. 3

18	DAY/TIME DESIGNATION	<input type="checkbox"/> 24 HOURS PER DAY, 7 DAYS PER WEEK OR:					
	SU	M	TU	W	TH	F	SA
19	CONTACT NAME						
20	CONTACT ADDRESS						
		CITY		STATE		ZIP CODE	
21	PHONE 1			22 PHONE 2			