Home Sharing Permit/Renewal Application and Acknowledgement

1. Host / Owner Information	
Property Owner Name:	Phone No.:
Host Name:	Phone No.:
Host Mailing Address:	Email Address:
Please check off the box that applies to you:	
$\hfill \square$ I have been the Property Owner for a m residence.	inimum of one year and live on the premises as my primary
□ I have been the Property Owner for a m a Qualifying Tenant and a lease that allow	inimum of one year who does not live on the premises but have as me to home share the residence.
$\hfill\Box$ I am a Qualifying Tenant and the lease	allows me to home share the residence.
2. Property Information	
Home Sharing Rental Property Address:	
Unit Type (circle one): Single-Family Home	Condo/Townhouse/Duplex/Apartment
Total Number of bedrooms: Number of bedrooms	edrooms utilized for home sharing rental:
Total on-site parking spaces available:	Garage parking spaces:
Driveway parking spaces:	
3. Local 24/7 Emergency Contact Information	
Contact Name:	Phone No.:
Contact Address:	
Contact E-mail Address:	
4. Hosting Platform Information	
Hosting Website:	Hosting Website:

(310) 217-9524 homesharing@cityofgardena.org Rev. 1/01/24 PLANNING DIVISION

APPLICANT ACKNOWLEDGMENT

	- ,	issued, the home sharing permit is on n may be through a lottery system if th	•		
	-` ,	ne home sharing permit does not creat not necessarily be renewed for succe			
followin	-` ,	f approved for this permit, within 45 d	ays I must provide the city with the		
•	Evidence that I have applied	ed for or obtained a business license f	or operating a home sharing rental.		
•	Evidence that I have applie sharing rental.	ed for or obtained a transient occupancy	y registration certificate for the home		
•	 Proof of general liability insurance in the amount of one million dollars combined single limit. This may be satisfied by an agreement with a hosting platform if the hosting platform(s) provides this level and insurance if the property is not listed in any other manner. 				
	-` ,	ny and all use of the property for home revocation of the Home Sharing Permi			
includin	ng Municipal Code Chapter	and regulations pertaining to the opposite of the opposite of the Administrative Guideline on the agree of the specifically set forth in this agree.	es and will abide by such rules and		
•		vill live on site or qualifying tenant li	ving on site, you hereby		
acknowle	edge the following:	. , ,			
acknowle	edge the following: (Initial) This is my primary re (Initial) I understand that I m	vill live on site or qualifying tenant lives sidence, meaning I reside there for at nust reside in the home during all time	least 183 nights per year.		
a guest	edge the following: (Initial) This is my primary re (Initial) I understand that I m	esidence, meaning I reside there for at	least 183 nights per year.		
a guest	edge the following: (Initial) This is my primary re (Initial) I understand that I m :. ame	esidence, meaning I reside there for at	least 183 nights per year. es the property is being occupied by		
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SUBMITTAL REQUIREMENTS CHECKLIST

Application Fee.
Home Sharing Rental Permit (HSR) Application and Acknowledgment Form (only one application is required per property regardless of the number of HSR).
Site Plan: showing all improvements on the entire property on which the home sharing unit(s) is/are located, including number and location of designated on-site parking spaces available
(including garage parking) for use by renter(s), and storage location of trash containers. Floor Plans (one per unit): labeling all interior rooms and the location of all bedrooms for home sharing. Include the number of beds (including sofa beds, inflatable mattresses, roll-a-way beds, hide-a-beds, and the like) to be rented as part of the home sharing rental, the dimensions of the of the bedrooms for home sharing, and all windows and exterior doors.
Proof of Ownership for at least one year (to be established by providing a copy of at least one document that identifies the full name or names of the applicant as owner and the address of the property such as a property tax bill, mortgage statement, or title report)
If applicable, proof that a qualifying tenant has resided at the residence for a minimum of one year.
Proof of Primary Residency (to be established by providing two documents which associate the property as the place of the applicant's personal life activities, such as valid federal or state-issued photo identification, passport, alien registration card, valid California voter registration card or status document, vehicle registration, health or vehicle insurance certificates/bills, pay stubs with name and address, utility bills)
Copy of lease if not owner's Primary Residence

PROPERTY OWNER AUTHORIZATION

Names/signatures	of all persons	having an ir	terest in the	property whose	consent is requ	ired to authoriz	e filing of
this application:		_		-			_

Name:	Signature:	Date:
Name:	Signature:	Date:

ACKNOWLEDGEMENT

State of California County of)		
On	_before me,		, Notary Public
personally appeared who proved to me on the basis of satisto the within instrument and acknown authorized capacity(ies), and that by upon behalf of which the person(s) ac	sfactory evidence to be the wledged to me that he/s his/her/their signature(s)	e person(s) whose name(s) is/ar she/they executed the same in on the instrument the person(s),	his/her/their
I certify under PENALTY OF PERJUR true and correct.	RY under the laws of the St	ate of California that the foregoir	ng paragraph is
WITNESS my hand and official seal.			
Signature	(Seal)		

QUALIFYING TENANT AUTHORIZATION

Name:	Signature:	Date:	
Name:	Signature:	Date:	
	ACKNOWLEDGEN	IENT	
State of California County of)		
On			, Notary Public,

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____(Seal)



SITE PLAN

Please draw a site plan in the space provided below, or on a separate sheet attached to this form, showing all improvements on the entire property on which the home-sharing rental unit(s) is/are located, number and location of designated on-site parking spaces available (including garage parking) for use by renter(s), and storage location of trash containers.

Community Development Department

1700 West 162nd Street Gardena, CA 90247-3778

(310) 217-9524 homesharing@cityofgardena.org www.cityofgardena.org

Address:	
Permit number:	Date:



FLOOR PLAN

Please draw a floor plan in the space provided below, or on a separate sheet attached to this form, labeling all interior rooms and the location of all bedrooms for home sharing. Include the number of beds (including sofa beds, inflatable mattresses, roll-a-way beds, hide-a-beds, and the like) to be rented as part of the home sharing rental, the dimensions of the of the bedrooms for home sharing, and all windows and exterior doors.

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