



**City of Carlsbad
Short-Term Vacation Rental
Declaration of Notification**

Please indicate which ONE type of notification you are reporting:
<input type="checkbox"/> IMPACT RESPONSE PLAN – Section One (Must be completed before Permits are issued)
<input type="checkbox"/> AMENDMENT OF IMPACT RESPONSE PLAN – Section Two (Must be completed annually)

Address of Proposed Short-Term Rental: _____
Maximum number of overnight occupants: _____ **Number of bedrooms available:** _____

A LIST OF RELEVANT ADDRESSES IS REQUIRED
You must submit a list of addresses of the neighboring residences abutting or across the street from the short-term vacation rental. To submit a list of addresses, either complete Page 2 of this form, or submit a separate sheet containing the addresses in question along with Page 1 of this form
Please indicate how you will submit a list of the addresses in question:
<input type="checkbox"/> I WILL COMPLETE PAGE 2 OF THIS FORM
<input type="checkbox"/> I WILL ATTACH A SEPARATE SHEET CONTAINING THE ADDRESSES

Section One	SERVICE OF IMPACT RESPONSE PLAN (Must be provided before Permits are issued)	
Name of Applicant:		Date of delivery:
As administrator of the associated Short-Term Vacation Rental Permit, I hereby attest to the delivery of Impact Response Plans to the attached addresses on the date indicated, in compliance with Section 5.60.060.A.7 of the City of Carlsbad Municipal Code.		
Signature:		Date:

Section Two	SERVICE OF AMENDED IMPACT RESPONSE PLAN (Must be updated annually)	
Name of Applicant:		Date of delivery:
As administrator of the associated Short-Term Vacation Rental Permit, I hereby attest to the delivery of Impact Response Plans to the attached addresses on the date indicated, in compliance with Section 5.60.060.A.7 of the City of Carlsbad Municipal Code.		
Signature:		Date:

Prior to Permit issuance this notice must be completed and returned to the City of Carlsbad STVR Enforcement Division, 1200 Carlsbad Village Dr, Carlsbad, CA 92008 or emailed to STVR@Carlsbadca.gov

City of Carlsbad Short-Term Vacation Rental Declaration of Notification

List of Addresses Notified

You must submit a list of the addresses of the neighboring residences receiving a copy of the impact response plan. The plan must be mailed or delivered to all residents and owners of property abutting or across the street from the short-term vacation rental. You may either complete page 2 of this form, or submit a separate sheet containing the address in question along with Page 1 of this form.

1	Address	City	Zip Code
2	Address	City	Zip Code
3	Address	City	Zip Code
4	Address	City	Zip Code
5	Address	City	Zip Code
6	Address	City	Zip Code
7	Address	City	Zip Code
8	Address	City	Zip Code
9	Address	City	Zip Code

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