



# City of Oroville

Planning Division - Community Development Department

1735 Montgomery Street  
 Oroville, CA 95965-4897  
 (530) 538-2430 FAX (530) 538-2426  
[www.cityoforoville.org](http://www.cityoforoville.org)

TRAKIT#: \_\_\_\_\_ - \_\_\_\_\_

## SHORT TERM VACATION RENTAL (STR)

(Please print clearly and fill in/provide all that apply)

REQUIRED FOR A COMPLETE APPLICATION		PERMIT TYPE	
Completed and signed Application Forms		Administrative Permit: \$435 + \$26.10 (6% Tech Fee) = \$461.10	
Application Fee Paid		Use Permit: \$3,500 (Deposit) + \$210 (6% Tech Fee) = \$3,710	

SITE INFORMATION				
Address:			Property Type (Single Family Residence, duplex, ADU, etc.):	
Is this the applicant's primary residence?	Yes	No	Number of Bedrooms:	
Is the site subject to Homeowner Association rules ("HOAs")?	Yes	No	Number of Bathrooms:	
If yes, applicant must submit a copy of the HOA authorization with this application to the City of Oroville.			Number of Beds:	
Do you use online site(s) for this property (e.g., Airbnb, VRBO)?	Yes	No	Max Number of Occupants:	
If yes:	Name/URL: Name/URL:		Number of Off-Street Parking Spaces:	
What is offered for rent?	Entire Home:		Room(s) in Home:	Number of Rooms:

24-HOUR EMERGENCY CONTACT		
Required for all short-term rental properties: Site Manager of property owner must be able to respond to issues within thirty (30) minutes of complaint.		
Name & Title:		Address:
City:	State:	Zip:
Primary Phone:	Alternate Phone:	E-mail:

REQUIRED DOCUMENTS	
<input type="checkbox"/>	General Application completed and attached.
<input type="checkbox"/>	Submit a floor plan of the property which provides the location of rooms, beds, bathrooms, and any kitchen facilities with maximum occupancy limit.
<input type="checkbox"/>	Submit a site plan which addresses parking areas and number of off-street parking spaces.
<input type="checkbox"/>	If property is a part of a Homeowner's Association, submit authorization letter from HOA Board allowing Short Term Rental Use.

**CAREFULLY READ AND INITIAL BELOW**

By initialing below, I acknowledge and agree to the following. All STR's shall be subject to the following requirements:

- \_\_\_\_\_ 1. I am required to have an active/paid/current Business License with the City.
- \_\_\_\_\_ 2. I am responsible for paying Transient Occupancy Tax on revenue generated from short term rent.
- \_\_\_\_\_ 3. All applicable City regulations apply to short term renters.
- \_\_\_\_\_ 4. Only the whole dwelling unit may be rented. For hosted stays, the property owner must be the primary resident of the rental unit and remain on site during the rental stay.
- \_\_\_\_\_ 5. The permittee must maintain the STR unit in a manner that is consistent with the character of the neighborhood.
- \_\_\_\_\_ 6. No permittee may rent a property to an individual for more than 30 consecutive nights per year as a short-term rental.
- \_\_\_\_\_ 7. No permittee shall allow any special event to occur on site that would otherwise require a city permit.
- \_\_\_\_\_ 8. Displaying of signs that indicate that the property is used or available for transient or short-term rental purposes is prohibited unless the proper sign permits are applied for and approved which comply with the underlying zoning district.
- \_\_\_\_\_ 9. Solid waste must be disposed of properly and waste and refuse bins must be stored outside of public view.
- \_\_\_\_\_ 10. Building standards. Each short-term rental shall be, and at all times remain, in compliance with all applicable laws and regulations, including but not limited to the City of Oroville Zoning Regulations and Building Regulations, the California Residential Code, the California Fire Code, the California Health and Safety Code, and the terms of all City-issued permits. In addition, each short-term rental shall comply with the following safety measures, prior to issuance of a short-term rental permit:
  - a. Smoke alarms (listed as complying with UL 217 and approved by the State Fire Marshall) installed (1) in each bedroom, (2) outside but in the immediate vicinity of each bedroom, and (3) on each level of the dwelling unit, including basements and habitable attics.
  - b. Carbon monoxide alarms (listed as complying with UL 2034) installed (1) outside but within the immediate vicinity of each bedroom, and (2) on every level of the dwelling unit, including basements.
  - c. At least one fire extinguisher installed on each habitable level of the dwelling unit.
- \_\_\_\_\_ 11. A copy of the short-term rental permit listing all applicable standards and limits, including the name, phone number, and email of the property manager, shall be posted inside the rental property in a prominent interior location. The applicable prohibitions, standards, and limits on occupancy shall be included.

**CAREFULLY READ AND INITIAL BELOW**

By initialing below, I acknowledge that I have been provided the following information by the City of Oroville:

- \_\_\_\_\_ 1. Transient Occupancy Tax Documents
- \_\_\_\_\_ 2. Noise Ordinance

**ADDITIONAL INFORMATION**

Provide any relevant project information not given (attach additional pages if necessary):

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The Community Development Department operates on a full cost recovery for processing of permits. Staff will charge their time and any expenses associated with processing the application against the initial deposit. Fees that have been captured for the reimbursement of City expenses are non-refundable.  
Technology cost recovery fees are non-refundable

**APPLICANT'S SIGNATURE**

I hereby certify under penalty of perjury that the answers I have given are true and correct to the best of my knowledge and belief, and I understand and agree that any false or misleading answer will result in denial or revocation of any permit. Further, the City is hereby authorized to seek and verify information contained in this application. I understand verification of the accuracy of the application information is a matter of public record and may be made available to interested parties upon request.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Lot Size: \_\_\_\_\_ sq.ft. Zoning: \_\_\_\_\_ General Plan: \_\_\_\_\_ APN: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

{ } Credit Card #: \_\_\_\_\_ { } Debit Card #: \_\_\_\_\_ { } Money Order { } Cash { } Check # \_\_\_\_\_