



**CITY OF ANAHEIM  
CHANGE OF OWNERSHIP  
SHORT-TERM RENTAL PERMIT APPLICATION**

200 S. Anaheim Blvd. #136, Anaheim, CA 92805  
P.O. Box 61042, Anaheim, CA 92803-6142  
(714) 765-5194

**Chapter 4.05-Anaheim Municipal Code**

Applications are  
accepted in person  
Mon-Fri 8AM-4PM

**Open/Start or Change Date:** \_\_\_\_\_

**PART 1: NAME AND ADDRESS OF SHORT TERM RENTAL PROPERTY**

Business Name or Legal Name of Owner of STR Property (as listed on Grant Deed) if Lessee, Legal Name of Lessee			
Property Address			
City <b>ANAHEIM</b>		State <b>CA</b>	Zip
(Include All Business Telephone Numbers) Business Phone	Fax Number	E-mail	
Mailing Address			
City		State	Zip

**PART 2: SHORT-TERM RENTAL OPERATOR INFORMATION**

Please check the appropriate ownership type:			
<input type="checkbox"/> Sole Ownership <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Co. <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Receiver <input type="checkbox"/> Trust <input type="checkbox"/> Other: _____			
Tax ID or EIN #:			
<b>Primary Owner, Partner, or Officer Information: (Please include additional owners on PART 2B)</b>			
Last Name		First Name	Middle
Alias or Maiden Names			
Home Address			
City		State	Zip      Phone
Place of Birth			Date of Birth
Driver's License No.	State	Social Security No.	Other Licenses Held      State
Email Address:			

**OFFICE USE ONLY**

APP REC'D \_\_\_\_\_ BY \_\_\_\_\_

TRANSMITTED TO DEPARTMENTS: DATE \_\_\_\_\_ BY \_\_\_\_\_

REVIEWED BY: \_\_\_\_\_

PLANNING DEPARTMENT  
(Zoning Division)      DATE \_\_\_\_\_ Recommendation \_\_\_\_\_ BY \_\_\_\_\_

Code Enforcement Division      DATE \_\_\_\_\_ Recommendation \_\_\_\_\_ BY \_\_\_\_\_

**PART 2B: OWNERSHIP INFORMATION**

Additional Owner, Partner, or Officer Information:				
Last Name	First Name		Middle	
Alias or Maiden Names				
Home Address				
City	State	Zip	Phone	
Place of Birth			Date of Birth	
Driver's License No.	State	Social Security No.	Other Licenses Held	State

**PART 2B: OWNERSHIP INFORMATION**

Additional Owner, Partner, or Officer Information:				
Last Name	First Name		Middle	
Alias or Maiden Names				
Home Address				
City	State	Zip	Phone	
Place of Birth			Date of Birth	
Driver's License No.	State	Social Security No.	Other Licenses Held	State

**PART 2B: OWNERSHIP INFORMATION**

Additional Owner, Partner, or Officer Information:				
Last Name	First Name		Middle	
Alias or Maiden Names				
Home Address				
City	State	Zip	Phone	
Place of Birth			Date of Birth	
Driver's License No.	State	Social Security No.	Other Licenses Held	State

**PART 2B: OWNERSHIP INFORMATION**

Additional Owner, Partner, or Officer Information:				
Last Name	First Name		Middle	
Alias or Maiden Names				
Home Address				
City	State	Zip	Phone	
Place of Birth			Date of Birth	
Driver's License No.	State	Social Security No.	Other Licenses Held	State

### PART 3: CORPORATION, L.L.C. OR PARTNERSHIPS OF SHORT-TERM RENTAL OPERATOR

Name of Responsible Managing Officer of Corporation, L.L.C. or Partnership:				
Name of the Corp., L.L.C., or Partnership				
State of Registration		Registration Number		Date of Registration
If a Corporation, include the names and addresses of each Officer, Director and each Stockholder holding more than five (5) percent of the stock in the Corporation. If a Partnership or LLC, include the names, residence addresses and dates of birth of each of the partners, including limited partners or members. (If needed please attach a separate list of officers)				
1 Name & Title		Address		
City		State	Zip	Date of Birth
2 Name & Title		Address		
City		State	Zip	Date of Birth
3 Name & Title		Address		
City		State	Zip	Date of Birth
4 Name & Title		Address		
City		State	Zip	Date of Birth
5 Name & Title		Address		
City		State	Zip	Date of Birth

### PART 4: PROPERTY OWNERSHIP INFORMATION

<input type="checkbox"/> Property owner is the same as Short-Term Rental Operator (skip to Part 5)				
<input type="checkbox"/> Short-Term Rental Operator is not property owner as listed on grant deed. (Complete Part 4)				
Please check the appropriate property ownership type:				
<input type="checkbox"/> Sole Ownership <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Co.				
<input type="checkbox"/> Limited Partnership <input type="checkbox"/> Receiver <input type="checkbox"/> Trust <input type="checkbox"/> Other: _____				
<b>Primary Owner, Partner, or Officer Information</b> (If needed please attach a separate list of owners):				
Last Name		First Name		Middle
Alias or Maiden Names				
Home Address				
City		State	Zip	Phone
Place of Birth			Date of Birth	
Driver's License No.	State	Social Security No.	Other Licenses Held	State
Email Address:				

## PART 5: BUSINESSES PROVIDING SERVICES OTHER THAN PROPERTY OWNER

Provide names of companies or individuals providing services such as property management, cleaning, transportation, babysitting, etc. other than owner or his/her/its employees. (If needed, please attach a separate list)

Please check if Owner/Operated Only  If Owner/Operated Number of Employees: \_\_\_\_\_

Business/Individual Name		Services Provided:		
Address				
City		State	Zip	Phone
Email Address	City of Anaheim Business Tax Cert#:		Initial Start Date of Services	
Business/Individual Name		Services Provided:		
Address				
City		State	Zip	Phone
Email Address	City of Anaheim Business Tax Cert#:		Initial Start Date of Services	
Business/Individual Name		Services Provided:		
Address				
City		State	Zip	Phone
Email Address	City of Anaheim Business Tax Cert#:		Initial Start Date of Services	

## PART 6: 24-HOUR LOCAL CONTACT PERSON

**REQUIRED FOR ALL SHORT-TERM RENTAL PROPERTIES:** A.M.C. Subsection 4.05.090.0104 provides emergency contact has ability to respond to issues within forty-five (45) minutes of complaint.

Name & Title		Address		
City		State	Zip	
Primary Phone:	Alternate Phone:		E-mail	

## PART 7: PROPERTY DESCRIPTION

Applicant must provide a detailed description of the short-term rental property. Please include the property type (Single/Multi-Family Home, Condominium) number of rooms, bedrooms, beds, baths, etc. Any changes to such list after issuance of the Permit must be submitted to the License Collector within fourteen (14) days. (If needed, please attach a separate list.)

Single Family Home  Multi-Family Home  Condominium  Other

\_\_\_\_\_ Total Number of Rooms (living room, bedroom, bathroom, etc...)

\_\_\_\_\_ Number of Bedrooms \_\_\_\_\_ Number of Beds

\_\_\_\_\_ Total Number of Bathrooms \_\_\_\_\_ Number of Full Bathrooms \_\_\_\_\_ Number of Powder Rooms

\_\_\_\_\_ Number of Off-Street Parking Spaces \_\_\_\_\_ Max Number of Occupants

Garage used as game room? Yes  No

Any other detailed information:

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## PART 8: AUTHORIZED AGENT

Please complete this section if application is being submitted/managed by person other than owner. <b>Notarized Authorized Agent Appointment Form Required</b>					
Full Legal Name			Relationship to Owner:		
Home Address					
City			State	Zip	Home Phone
Date of birth		Social Security No.		Driver's License No.	
Email Address:					

## PART 9: Required Documents for Submittal of this Application:

1.  Floor plan accurately and clearly depicting the size and approximate square footage of the dwelling including the use of each room, the number, location and approximate square footage of all bedrooms, the number of beds in each bedroom, bathrooms, garage and the location and description of the furniture located within a garage. Indicate if the garage will be used as a game room.
2.  Site plan accurately and clearly depicting the size and location of the existing dwelling and the approximate square footage in the dwelling, the number and location of designated off-street parking spaces, any accessory buildings, including, but not limited to garages and accessory living quarters. Parking spaces shall be clearly dimensioned to demonstrate compliance with minimum required standards. Garages used for game rooms may not be counted as required parking.
3.  Copy of all advertisements for the Short-Term Rental of this property including all listings of the online websites with the identifying information for this property (e.g. listing number).
4.  Current and dated photographs of the interior of the garage and the parking spaces provided on-site.
5.  **Affidavit of Mailing** acknowledging certification of mailing to adjacent neighbors.  
(Section 4.05.100.010.0105(b)).
6.  Submit **Indemnification Agreement** completed by the owner.
7.  **Self-Certification Form** executed by the Owner.
8.  Submit a copy of the Grant Deed filed with the Orange County Tax Assessor.
9.  Submit a copy of Fictitious Business Name Statement filed with the Orange County Recorder's office with official recordation stamp if using a Fictitious Business Name or D.B.A. for your business.
10.  Submit an endorsed copy of Articles of Incorporation filed with the Secretary of State of California.
11.  Submit an endorsed copy of Statement of Information filed with the Secretary of State of California if owned by a Corporation or L.L.C.
12.  Submit an endorsed copy of Articles of Organization filed with the Secretary of State of California if owned by a L.L.C.
13.  Submit an endorsed copy of Statement of Partnership Authority filed with the Secretary of State of California if owned by a Partnership.
14.  Submit original Notarized Authorized Agent Appointment Form if property managed by person(s) other than property owner.
15.  Submit legible copies of government issued photo I.D. (Driver's License or Passport) for each owner/officer.
16.  **Non-Refundable Application Fee of \$498.00**

**Please make check payable to: City of Anaheim**

## PART 10: CERTIFICATION

Individuals executing this Application and Certification on behalf of a corporation, partnership, L.L.C. or other entity or organization represent and warrant that they are duly authorized to execute and deliver this Application and Certification on behalf of such entity or organization and that this Application and Certification is binding upon the same in accordance with its terms.

I have read and understand all regulations pertaining to the operation of a short term rental, as set forth in Chapter 4.05 of the Anaheim Municipal Code, including the city's business license requirements and the city's transient occupancy tax requirements and that I am responsible for compliance with all such regulations and requirements. I understand that an incomplete application may result in the denial of my short-term rental permit. **I hereby certify under the penalty of perjury that the information given is true and correct. I understand that providing false information or withholding information, including any criminal record, is grounds for denial or revocation of my permit and may subject me to criminal prosecution. I do hereby authorize the City of Anaheim, its agents and employees to seek verification of the information contained on this application. I further understand that I may not conduct the activity applied for until a permit has been granted, and that a copy of the City Ordinances regulating Short-Term Rental Permits is available to me in the City Clerk's Office or over the Internet at [www.anaheim.net](http://www.anaheim.net) (Chapter 4.05 of the Anaheim Municipal Code).**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name and Title