



City of Sonora

Annual Fee **\$25.00**

(Acct # 303-04107-001)

Date: _____

TRANSIENT USE PERMIT RENEWAL APPLICATION

I hereby make application for a Renewal of a Transient Use Permit, under the terms of Chapter 17.64 and other pertinent Code Sections of the Sonora Municipal Code as included within Ordinance No. 824 attached hereto.

Rental Property Address:	
Assessor's Parcel No.:	Building Square Footage:
Number of Bedrooms:	<input type="checkbox"/> Room Rental or <input type="checkbox"/> House Rental
Owner(s) Name:	Daytime Phone #: ()
Mailing Address:	Email:
Evening Phone #: ()	Cell #: ()
Owner's Representative, if applicable:	Daytime Phone #: ()
Mailing Address:	Email:
Evening Phone #: ()	Cell #: ()
Emergency Contact Information:	
Name _____	Email _____
Daytime Phone # _____	Evening Phone # _____
Cell # _____	
Will more than \$5,000 in revenue be generated for transient use on this property?	
Yes <input type="checkbox"/> No <input type="checkbox"/>	

If Yes, you will be required to maintain an annual City Business License.
For information contact City Administration at (209) 532-4541.

Estimated annual gross rental income \$ _____

The rental unit has a properly maintained fire extinguisher. Yes No

The rental unit has smoke detectors. Yes No

The rental unit has operating carbon monoxide detectors. Yes No

Transient use of residential property is subject to the payment of transient occupancy tax. The Owner is responsible in assuring that these payments are made as required. The owner or owner's representative shall remit the transient occupancy tax to the City of Sonora as set forth in Chapter 3.20 of the Sonora Municipal Code. For further information contact City Administration at (209) 532-4541.

I hereby certify that smoke detectors are installed in all sleeping quarters and common areas and that fire extinguishers are accessible to protect the health and safety of the occupants of the transient use parcel and the owner/owner's representative shall provide access and information to the fire inspector as may be needed to ensure health and safety for occupants of the transient use parcel.

I certify under penalty of perjury under the laws of the State of California that the information on this application is true and correct. I have read and agree to abide by the requirements of the Sonora Municipal Code related to Transient Residential Use.

Owner's Signature: _____ Date: _____

_____ Date: _____

Owner's Representative: _____ Date _____

PLEASE MAIL OR DROP YOUR COMPLETED APPLICATION IN THE MAIL SLOT IN FRONT OF CITY HALL, ALONG WITH YOUR RENEWAL FEE OF \$25.00 BY JUNE 30, 2020 TO CITY OF SONORA, ATTN: KIM CAMPBELL, 94 N. WASHINGTON STREET, SONORA, CA 95370 OR EMAIL THE APPLICATION TO: KCAMPBELL@SONORACA.COM. CREDIT CARD PAYMENTS CAN BE MADE OVER THE PHONE, HOWEVER THERE IS A \$5.00 CONVENIENCE FEE TO USE A CARD AS A FORM OF PAYMENT.

YOUR CURRENT PERMIT EXPIRES ON 6-30-20.