



SHORT-TERM RENTAL PROGRAM SAFETY SELF-CERTIFICATION FORM

This form is provided to owners and operators of short-term vacation rentals in east Placer County to assist with ensuring safe rentals. These items are required pursuant to Chapter 9.42 of the Placer County Code. If you have any questions regarding the completion of this application, please contact the Short-Term Rental Division at 530-581-6234. Provide your initial acknowledging each item and provide your signature at the end of the document.

1. Posted street address visible from street (CFC 505.1) (PCC 9.42)

New and existing buildings shall have approved address numbers, building numbers or approved building identification placed in a position that is plainly legible and visible from the street or road fronting the property.

_____ (initial)

2. Defensible space maintained around structure (PRC 4291)

Non-fire resistant vegetation or growth shall be kept clear of buildings and structures.

_____ (initial)

3. Bear box (PCC Chapter 8 Article 8.16 Part 1 Div. III and 9.42)

Each Trash Receptacle shall be "animal proof".

_____ (initial)

4. Onsite parking (PCC Chapter 9.41 and PCC 10.12.020)

Onsite shall be provided and accommodate the occupancy of the rental. If the property does not have onsite parking, owner shall have a County approved parking plan designating the location of the offsite parking. Snow area parking must comply with all applicable Placer County Codes including PCC 10.12.020.

_____ (initial)

5. Provide extinguishers and properly mount on each floor (CFC 906.1) (PCC8.16.1)

Portable fire extinguishers **Type 3-A: 40-B:C** shall be located in a conspicuous location where they will have ready access and be immediately available for use. Portable fire extinguishers shall not be obstructed or obscured from view. In rooms or areas in which visual obstruction cannot be completely avoided, means shall be provided to indicate the locations of the extinguishers. Extinguishers shall be of a type that can be serviced yearly.

_____ (initial)

6. Smoke Alarms functional and within operable life (10 Years) (CFC901.5)

The proper installation and maintenance of smoke alarms is required. Smoke alarms shall be installed in each sleeping area and outside each sleeping area within immediate vicinity such as a common hallway or room and on each floor.

_____ (initial)

7. Carbon monoxide alarms (CFC901.5)

Carbon monoxide alarms shall be operable and installed outside each sleeping area such as a common hallway or room and on each floor (CFC 901.5)

_____ (initial)

8. Fire sprinkler systems (if applicable)

Fire sprinkler systems shall be in operable condition at all times. (CFC901.4.1)

_____ (initial)

9. Minimum bedroom requirements

Bedrooms shall be a minimum of 70 square feet and satisfy requirements of the California Residential Code. All bedrooms contain at least one egress windows with an opening of at least 5.7 square feet which have at least a 24-inch opening and are at least 20 inches wide and a sill height of not more than 44 inches (CFC1030.2) (CRC R310).

_____ (initial)

10. Breaker panel

Panel shall be clearly marked and indicating all circuits and shall not be blocked of access.

_____ (initial)

11. Trash/refuse

All short term rentals above 5000 feet in Placer County are required to have an operable bear bin enclosure. (PCC8.16.1)

_____ (initial)

12. Cell phone service

If located in an area with inadequate cellular service, you must provide a working landline phone, Voice Over Internet Protocol or monitored alarm system.

_____ (initial)

13. Good Neighbor Flyer Interior Posting

There shall be a sign posted in a conspicuous location inside the STR that clearly displays the STR's address, the local emergency contact's name and number, short term rental helpline and all other pertinent emergency contact numbers. The interior signage will also include emergency evacuation information.

_____ (initial)

14. Building permit compliance

The rental has been constructed and authorized with a valid building permit issued by the Placer County Building Services Division. By providing my initials and signing this form, I certify that the unit complies with the California Building Code.

_____ (initial)

I, Owner or owner's agent hereby certifies that the above conditions have been met:

Property Address: _____

OWNER/ AGENT

DATE: