



CITY OF SANTA MONICA HOME-SHARING ORDINANCE RULES

Effective: July 1, 2016

SCOPE AND INTENT

These rules and regulations ("Rules") established pursuant to Santa Monica Municipal Code Section 6.20 shall be followed by hosts and hosting platforms as applicable. All staff responsible for the administration and/or enforcement of the Home-Sharing Ordinance must implement and enforce the program in keeping with these rules. These Rules are not intended to be duplicative.

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I) DEFINITIONS

- a) CITY means the City of Santa Monica.
- b) SMMC means the Santa Monica Municipal Code.
- c) ACCESSORY STRUCTURE means living quarters, including lawfully permitted second units as defined by the Zoning Ordinance on the same premises as a single family residence. Rent Control Bootleg Units as defined in section 9.04.18.075 of the SMMC are not considered Accessory Structures for the purpose of the Home Sharing Ordinance.
- d) DWELLING UNIT means one or more rooms designed, occupied or intended for occupancy as separate living quarters. A dwelling unit includes a single-family residence, an apartment or other leased premises, or residential condominium unit. A dwelling unit shall include a detached Accessory Structure (e.g. guest house) that is intended for human habitation (i.e. living quarters) when the entire property is designated for a single family residential use. Dwelling unit does not include individual hotel/motel guest rooms, condominium timeshare units, cabins, or similar guest accommodations rented to transient guests in a hotel, inn, or similar transient lodging establishment operated by an innkeeper.
- e) GUEST or VISITOR means a person who rents a home-share and/or vacation rental.
- f) HOME-SHARE means an activity whereby the resident(s) host visitors in their homes, for compensation, for periods of 30 consecutive days or less, while at least one of the dwelling unit's primary residents lives on-site, in the dwelling unit, throughout the visitors' stay.
- g) HOST means a person engaged in providing a home-sharing and/or vacation rental.
- h) HOSTING PLATFORM means a marketplace in whatever form or format which facilitates the Home-Sharing or Vacation Rental, through advertising, match-making or any other means, using any medium of facilitation, and from which the operator of the hosting platform derives revenues, including booking fees or advertising revenues, from providing or maintaining the marketplace.
- i) HOUSE SWAPPING means the exchange of a house by one owner with another owner in a different city for short periods of time by agreement between both parties to exchange homes for a specified period of time without compensation.

- j) LIVES ON SITE means being present in the dwelling unit where the home-sharing is being offered, which includes but is not limited to sleeping overnight, preparing and eating meals, entertaining, and engaging in other activities in the dwelling unit that are typically enjoyed by a person in their home.
- k) SHORT-TERM RENTAL means any rental of any living accommodation that is 30 consecutive days or less, including hotels, motels, bed and breakfasts, home-sharing and vacation rentals.
- l) RESIDENT means primary resident of a dwelling unit, when a person occupies a dwelling, typically a house or an apartment, that serves as their primary residence, though they may share the residence with other people. For the purposes of home-sharing, a host may not have more than one residence within the city of Santa Monica.
- n) TRANSIENT OCCUPANCY TAX means local transient tax as set forth in Chapter 6.68 of the SMMC. The tax is paid by the guest when paying for their rental. The collected TOT is then remitted to the City.
- o) VACATION RENTAL means a rental of any dwelling unit, in whole or in part, within the City of Santa Monica, to any person(s) for exclusive transient use of 30 consecutive days or less, whereby the unit is only approved for permanent residential occupancy and not approved for transient occupancy or Home-Sharing as authorized by Chapter 6.20 of the SMMC.

II) HOME-SHARING HOSTS REQUIREMENTS AND BUSINESS LICENSE CONDITIONS

A host must comply with the following conditions:

- a) A Home-Share may only be offered in a space intended for human habitation. For example, a host may not rent a space in an accessory structure that is a storage shed or garage as a Home-Share.
- b) A host may not advertise their home-sharing business in any area that is exterior to the dwelling unit where the home-sharing is occurring. This includes common interior areas.
- c) A host must clearly advertise the unit as a shared space, unless the advertised rental is an accessory structure, in which case the accessory structure may be advertised as a separate unit (aka "entire home/apartment").
- d) In any advertisement of the Home-Share a host must include the Business License number issued by the City.

- e) A Home-Share host must provide the Uniform Resource Locator (URL), (i.e. the web site address) for any and all advertisements of the rental on the business license application.
- f) A host must provide guests with information related to emergency exit routes if the unit is part of a multifamily building of more than one story.
- g) Transient Occupancy Taxes (TOT) shall be collected on all Home-Sharing rentals. If a Hosting Platform does not collect payment for the rental, hosts are solely responsible for the collection of all applicable TOT and remittance of the collected tax to the City on a monthly basis. If a Hosting Platform does collect payment for rentals, then it and the host shall both have legal responsibility for the collection and remittance of the TOT.
- h) No person or entity may operate more than one Home-Share in the City of Santa Monica.
- i) A Home-Sharing applicant must provide the following as part of his/her application:
 - 1) Address where the Home-Sharing will take place.
 - 2) Type of dwelling unit (e.g. single family home, apartment, condominium).
 - 3) Whether the applicant is a tenant or owner of the dwelling unit.
 - 4) The total number of full time occupants of the dwelling unit.
 - 5) A list of all persons that will be hosting.
 - 6) Contact information for each person that will be hosting (e.g. email, cell phone).
 - 7) A list of each bedroom, office, den, living room, etc., in the dwelling unit. The list shall include for each room:
 - i Whether or not the room will be rented
 - ii The maximum number of overnight guests that will be allowed
 - 8) Whether or not the unit is rent controlled.
 - 9) A link to the advertisement of the rental.
 - 10) An affidavit certifying that the host will comply with all of the provisions of the Home-Sharing Ordinance, Business License Conditions for operating a Home-Share as outlined in these rules, and all relevant laws or be subject to revocation of their Business License.

III) HOME-SHARING HOSTS APPLICATION PROCEDURES

Any person who intends on operating a Home-Share from their primary residence shall complete the Home-Sharing Registration Package (HSRP). The HSRP shall include all instructions, check-lists, applications, and other educational materials related to the Home-Sharing Ordinance and relevant local laws that the host is required to comply with. Home-Share applications are exempt from the Zoning Conformance Review fee and Home Occupancy Permitting requirements.

The applicant must submit all of the following to the Business License unit to register:

- a) Business License Home-Sharing Application.
- b) Proof of Residency. Acceptable forms of proof include: copy of a current utility bill, cable bill, phone bill, credit card bill or bank statement showing your name and current Santa Monica residential address. Leases, rental agreements, or IDs may not be accepted as proof.

IV) HOSTING PLATFORM REQUIREMENTS

- a) The operator of a hosting platform shall report quarterly to the City, in an electronic comma-delimited format or similar format such as MS Excel, the following information:
 - 1) The address of each residential unit that was offered on the operator's hosting platform for occupancy for tourist or transient use and was occupied for that use during that quarterly reporting period.
 - 2) The total number of nights that the residential unit was occupied for tourist or transient use.
 - 3) The amounts paid for the occupancy of that residential unit listed.
 - 4) The name(s) of the person(s) responsible for each unit listed.
- b) If the Hosting Platform collects payment for the rental, the hosting platform and the host shall both have legal responsibility for the collection of all applicable TOT and remittance of the collected tax to the City on a monthly basis.

- c) A Hosting Platform must provide its Santa Monica host clients or potential host clients the following disclosure:

"On May 12, 2015, the Santa Monica City Council adopted the Home-Sharing Ordinance reiterating its ban on the rental of entire units as vacation rentals. The Home-Sharing Ordinance also legalized the short term rental of a portion of a person's home when the host lives on-site throughout the visitor's stay and when the host obtains a business license. Hosts are also required to collect and remit Transient Occupancy Tax (TOT) if not collected and remitted by the hosting platform."



TRANSIENT OCCUPANCY TAX RETURN
and TOURISM MANAGEMENT DISTRICT ASSESSMENT

For the MONTH ending _____

Name of Establishment _____

Name of Owner _____

Address: _____

Address: _____

City, ST, Zip: _____

City, ST, Zip: _____

AVERAGE OCCUPANCY RATE for the Month: _____ %

Computation of TOT Tax:

1. Total Gross Room Rental Receipts..... \$ _____
2. Allowable Deductions: (include appropriate forms)
- a) Permanent Residents..... \$ _____
- b) Permanent Residents (refund of prior month)..... \$ _____
- c) Federal, State of California, or City of Santa Monica Employee on Official Business... \$ _____
- d) Other (please attach explanation)..... \$ _____
- TOTAL DEDUCTIONS: \$ _____
3. Taxable Rental Receipts (Line 1 - Line 2)..... \$ **0.00**
4. Transient Occupancy Tax Due (14 % of Line 3)..... \$ **0.00**
5. Applicable Penalties (see below)..... \$ _____
6. TOTAL TOT TAXES AND PENALTIES DUE (Line 4 + Line 5)..... \$ **0.00**

Computation of TMD Assessment: (if applicable)

7. Occupied Room Nights (excluding complimentary rooms)..... _____
8. Assessment per Room Night (per previously determined calculation)..... \$ _____
9. Assessment Amount (Line 7 X Line 8)..... \$ _____
10. Allowable Deductions (include appropriate documentation)
- a) Stays longer than 30 days..... \$ _____
- b) Contracts signed prior to January 1, 2013..... \$ _____
- c) Any room paid for in full prior to January 1, 2013..... \$ _____
- TOTAL DEDUCTIONS: \$ _____
11. Applicable Penalties (see below)..... \$ _____
12. TOTAL TMD ASSESSMENT AND PENALTIES DUE (Lines 9 - 10 + 11)..... \$ **0.00**

13. TOTAL AMOUNT DUE (Line 6 + Line 12)..... \$ **0.00**

Payment is due on the first day after the end of the reporting period.

Make checks payable to **City of Santa Monica** and remit to:

City of Santa Monica
Treasury
1717 4th Street, Suite 150
Santa Monica, CA 90401

PENALTIES

1. Penalty of 10% will be assessed if payment is not received by the last day of the month in which remittance is due.
2. Additional 10% penalty assessed if total amount due is unpaid for an additional 30 days

I certify, under penalties of perjury and misdemeanor, that, to the best of my knowledge and belief, the statements herein are true and correct.

Signature _____

Title _____

Phone Number _____

Date _____

www.smgov.net/departments/finance ~ (310) 458-8741

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BUSINESS LICENSE HOME-SHARING APPLICATION

Revenue Division — Business License
P. O. Box 2200, Santa Monica, California 90407-2200
Phone: 310-458-8745 • FAX 310-451-3283
Email: business.license@smgov.net • www.smgov.net/businesslicense

Official Use Only

BL #:

Fees Paid: \$

Paid By:

☐ Ca. ☐ Ck # ☐ AMEX
☐ Visa ☐ Disc. ☐ MC ☐ Web

Date Paid:

Processed by:

Complete this application if you are the primary resident of a dwelling unit and will be conducting a Home-Share business, as defined by SMMC §6.20. See Home-Sharing Registration Packet (HSRP) for more information.

HOME-SHARING ENTITY INFORMATION

1	DBA (If applicable):						
2	Legal Business Name:						
3	Home-Sharing Physical Address: <table border="1"><tr><td>Number</td><td>Street</td><td>Unit/Suite #</td><td>City</td><td>State</td><td>Zip</td></tr></table>	Number	Street	Unit/Suite #	City	State	Zip
Number	Street	Unit/Suite #	City	State	Zip		
4	Mailing Address: <input type="checkbox"/> Same as physical <table border="1"><tr><td>Number</td><td>Street</td><td>Unit/Suite #</td><td>City</td><td>State</td><td>Zip</td></tr></table>	Number	Street	Unit/Suite #	City	State	Zip
Number	Street	Unit/Suite #	City	State	Zip		
5	Business Phone: <table border="1"><tr><td>Alternate Phone:</td><td><input type="checkbox"/> Mobile</td><td><input type="checkbox"/> Fax</td><td><input type="checkbox"/> Other</td></tr></table>	Alternate Phone:	<input type="checkbox"/> Mobile	<input type="checkbox"/> Fax	<input type="checkbox"/> Other		
Alternate Phone:	<input type="checkbox"/> Mobile	<input type="checkbox"/> Fax	<input type="checkbox"/> Other				
6	Date Home-Sharing began/will begin within the City of Santa Monica? <table border="1"><tr><td>Month</td><td>Day</td><td>Year</td></tr></table> Federal Employee Identification #:	Month	Day	Year			
Month	Day	Year					
7	Business Type: <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input type="checkbox"/> Non-Profit <input type="checkbox"/> Trust						
8	Email: Website:						

RESIDENT/HOST INFORMATION

9	Number of full time occupants of the dwelling unit: Please list <u>all</u> persons that will be hosting below (use additional sheets if needed)							
10	PRIMARY Resident First Name:	PRIMARY Resident Last Name:						
	Title: <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partner <input type="checkbox"/> President <input type="checkbox"/> Managing Member <input type="checkbox"/> Trustee <input type="checkbox"/> Other:							
	Type of Proof of Residency: <input type="checkbox"/> Bank Statement <input type="checkbox"/> Utility Bill <input type="checkbox"/> Phone Bill <input type="checkbox"/> Cable Bill <input type="checkbox"/> Credit Card Bill							
	Address: <table border="1"><tr><td>Number</td><td>Street</td><td>Unit/Suite #</td><td>City</td><td>State</td><td>Zip</td></tr></table> Phone:		Number	Street	Unit/Suite #	City	State	Zip
Number	Street	Unit/Suite #	City	State	Zip			
	Email:	DOB: DL or Gov't Issued ID#: SSN:						
11	ADDITIONAL Resident First Name:	ADDITIONAL Resident Last Name:						
	Type of Proof of Residency: <input type="checkbox"/> Bank Statement <input type="checkbox"/> Utility Bill <input type="checkbox"/> Phone Bill <input type="checkbox"/> Cable Bill <input type="checkbox"/> Credit Card Bill							
	Address: <table border="1"><tr><td>Number</td><td>Street</td><td>Unit/Suite #</td><td>City</td><td>State</td><td>Zip</td></tr></table> Phone:		Number	Street	Unit/Suite #	City	State	Zip
Number	Street	Unit/Suite #	City	State	Zip			
	Email:	DOB: DL or Gov't Issued ID#: SSN:						
12	ADDITIONAL Resident First Name:	ADDITIONAL Resident Last Name:						
	Type of Proof of Residency: <input type="checkbox"/> Bank Statement <input type="checkbox"/> Utility Bill <input type="checkbox"/> Phone Bill <input type="checkbox"/> Cable Bill <input type="checkbox"/> Credit Card Bill							
	Address: <table border="1"><tr><td>Number</td><td>Street</td><td>Unit/Suite #</td><td>City</td><td>State</td><td>Zip</td></tr></table> Phone:		Number	Street	Unit/Suite #	City	State	Zip
Number	Street	Unit/Suite #	City	State	Zip			
	Email:	DOB: DL or Gov't Issued ID#: SSN:						
13	EMERGENCY Contact First Name:	EMERGENCY Contact Last Name:						
	24 Hour Phone:	Email:						

Complete next page

CITY OF SANTA MONICA BUSINESS LICENSE APPLICATION — HOME-SHARING

HOME-SHARING ACTIVITY INFORMATION

14	Host Information:	In relation to the dwelling unit, the applicant is the: <input type="checkbox"/> Property owner <input type="checkbox"/> Lessor <input type="checkbox"/> Sub-lessor If tenant (lessor/sub-lessor), is the unit rent controlled? <input type="checkbox"/> Yes <input type="checkbox"/> No			
15	Property Information:	Select which type of dwelling unit the Home-Sharing will take place: <input type="checkbox"/> Single Family <input type="checkbox"/> Apartment <input type="checkbox"/> Condominium			
16	Home-Share Activity:	List all rooms in the dwelling unit: (use additional sheets if necessary)	Will room be rented?	Maximum number of overnight guests	Length of stay offered*:
		<input type="checkbox"/> Bedroom: # of bedrooms available: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> up to 30 days <input type="checkbox"/> more than 30 days*
		<input type="checkbox"/> Office	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> up to 30 days <input type="checkbox"/> more than 30 days*
		<input type="checkbox"/> Den	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> up to 30 days <input type="checkbox"/> more than 30 days*
		<input type="checkbox"/> Living Room	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> up to 30 days <input type="checkbox"/> more than 30 days*
		<input type="checkbox"/> Guest House	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> up to 30 days <input type="checkbox"/> more than 30 days*
		<input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> up to 30 days <input type="checkbox"/> more than 30 days*
17	List all hosting platforms you will be using and listing numbers associated for each platform: (use additional sheets if necessary)	<u>Hosting Platform Website (s)</u>		<u>Your Listing # (s)</u>	

DECLARATION, AFFIDAVIT AND SIGNATURE

I declare, under penalty of making a false declaration, that I am authorized to complete this form, and to the best of my knowledge and belief it is a true, correct and complete statement, made in good faith. I understand and agree that the granting of this license requires my compliance with all applicable Santa Monica Municipal Code provisions, state and federal laws and all conditions set forth above. I also understand and I am familiar with such local, state and federal laws and the conditions set forth above may result in revocation of this license.

I also certify that I will comply with all applicable laws, including but not limited to all limitations, conditions and requirements of Chapter 6.20 of the Santa Monica Municipal Code ("Home-Sharing Ordinance") and the Home-Sharing Administrative Rules and Regulations. I understand that failure to comply will be grounds for revocation of my business license.

Name: _____ Title: _____

Signature: _____ Date: _____

FEES DUE:

RETURN ENTIRE APPLICATION FORM TO ABOVE ADDRESS • MAKE CHECK PAYABLE TO THE CITY OF SANTA MONICA
Acceptance of payment does not constitute approval of business license. Authorization to conduct business is not granted until license is issued.

☐ Check here and enter \$0 in the Business License Tax box below if claiming the Small Business Exemption (SBE).
You may not claim the SBE if annual worldwide gross receipts will exceed \$40,000.00 or if you are filing this application more than thirty (30) days after your business start date.

NOTE: On 09/19/12, Governor Brown Signed into law Senate Bill 1186, which adds a state fee of \$1.00 on any applicant for a local business license, similar instrument or permit, or renewal. The purpose of this fee is to increase disability access and compliance with construction related accessibility requirements and to develop education resources for businesses in order to facilitate compliance with federal and state disability laws, as specified under federal and state law, compliance with disability access is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligation and how to comply with the disability access laws at the following agencies:

The Division of the State Architect at www.dgs.ca.gov/das/home.aspx
The Department of Rehabilitation at www.rehavcahwnet.gov
The California Commission on Disability Access at www.cdda.ca.gov

LICENSE FEES DUE		OFFICIAL USE ONLY
Business License Tax	\$ 75.00	\$
<input type="checkbox"/> Check here for SBE	\$ 0.00	
State Mandated Fee	\$ 1.00	\$
Late Penalty	\$	\$
Total Due	\$	\$
Amount Paid	\$	\$
Fees Due	\$	\$

Thank you for doing business in the City of Santa Monica!