

**Mono County
Community Development Department**

PO Box 347
Mammoth Lakes, CA 93546
(760) 924-1800, fax 924-1801
commdev@mono.ca.gov

Planning Division

PO Box 8
Bridgeport, CA 93517
(760) 932-5420, fax 932-5431
www.monocounty.ca.gov

**SHORT-TERM RENTAL
ACTIVITY PERMIT APPLICATION**

Please answer all questions as accurately and completely as possible to avoid potential delays in processing. Attach additional sheets, as necessary. See Mono County Code (MCC) Chapter 5.65 for clarifications, definitions and additional guidance.

DATE RECEIVED _____
RECEIVED BY _____
RECEIPT # _____ CHECK # _____

I. PROPERTY INFORMATION:

Address 182 Eagle Peak Dr. Bridgeport, CA 93517
Assessor's Parcel Number 010-313-003-000 Community Twin Lakes, Bridgeport
Land Use Designation (Select one):
 SFR ER RR MFR-L RMH
Use Permit # _____

II. RENTAL TYPE APPLYING FOR

Owner-occupied Non-owner occupied in June Lake

III. PROPERTY OWNER(S) INFORMATION (Please add additional pages if needed)

- A. Name(s) Timothy and Misti Sullivan
- B. Telephone Number 310-809-4003
- C. Email address misti.sullivan@yahoo.com
- D. Mailing address PO Box 68, Bridgeport, CA 93517
- E. Mono County Business License # May Put under resort if possible or
 I am in the process of obtaining a Mono County Business license
- F. Mono County Transient Occupancy Tax Certificate # _____ or
 I am in the process of obtaining a Mono County Transient Occupancy Tax Certificate

If the Property Owner is a business entity, please attach a list of owners including shareholders or persons with ownership interest, the legal status of the business entity, and proof of registration with the Secretary of State.

Does the property owner have any other Short-Term Rental Permits within Mono County? YES NO

Address: 10316 Twin Lakes Rd. / Twin Lakes Resort

Are there any additional Short-Term Rental units on the property? YES NO

IV. PREMISES LOCATION AND INFORMATION

- A. ASSESSOR'S PARCEL # 010-313-003-000
- B. STREET ADDRESS 182 Eagle Peak Dr
- C. Attach proof of ownership or premises
- D. Attach a "to scale" diagram of the premises, showing, without limitation, a site plan, building layout, and a parking diagram.

V. 24-HOUR CONTACT

List the following information for the 24-hour contact person. If applying for a non-owner occupied rental, a separate, fully-licensed management company or property manger is required.

Name Misti Sullivan

Email Address misti.sullivan@yahoo.com

Telephone number 310-809-4003

California real estate license number (if applicable) n/a
**Please attached certified property manager credentials.*

VI. ATTACHMENTS [MCC section 5.65]

- Proof of property ownership, and list of all owners.
- Site plan drawn to scale showing a diagram of premises, building layout, and parking plan, and floor plan if renting a room within a unit.
- A copy of the required interior and exterior signage.
- A copy of the Rental Agreement.
- Certified property manager credentials (for non-owner occupied rentals).

VII. CERTIFICATION AND ATTESTATION

[Signature] I hereby certify that I have furnished in the attached exhibits the data and information required for this initial evaluation to the best of my ability, and that the information presented is true and correct to the best of my knowledge and belief. I understand that this information, together with additional information that I may need to provide, will be used by Mono County to evaluate, issue and renew a short-term rental activity permit.

[Signature] The applicant and all persons involved in management have the ability to comply with all laws regulating short-term rentals in the State of California and Mono County, and shall maintain such compliance during the term of the permit.

[Signature] I hereby provide the County, its agents, and employees authorization to seek verification of the information contained in this application.

[Signature] I agree to comply with all requirements of Mono County Code section 5.65.110 and the Mono County General Plan.

- I have paid the required application fee.

By signing below the applicant is foregoing that the information provided is true and correct under penalty of perjury.

Signature  _____ Date 12/3/2021

NOTES:

Failure to provide any of the requested information may result in an incomplete application determination, processing delays, and may result in the rejection of the application.

All Short-Term Rental Permits expire August 31st of each year unless renewed or revoked in accordance with Mono County Code Chapter 5.65. Permits granted within three (3) months prior to the expiration date shall skip the first renewal cycle and instead shall expire on August 31st of the following year.

An application for renewal and/or modification shall be filed with the Community Development Department, on the form(s) and in the manner prescribed by the Department, at least thirty (30) calendar days before expiration of the permit, accompanied by the required renewal/modification fee. If the renewal application and fee are not timely received, the applicant will be required to submit a new application.

Inspections of permitted operations will be scheduled throughout the year. Failed inspections may be grounds for non-renewal.

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**PLOT PLAN
CHECKLIST**

Lack of a plot plan or any of the required information will delay the review of your plans by the Planning Division.

PLOT PLANS MUST INCLUDE:

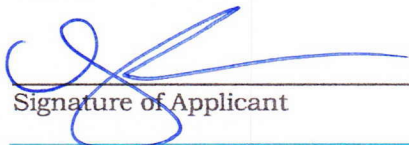
- Name/address/phone number of owner, applicant, plan preparer
- North arrow, scale (1"=20', etc.)
- Assessor's Parcel Number (APN)
- Location/name of boundary streets, surface waters and recorded easements on property (include type and size of any easements)
- Dimensioned property lines/project boundary lines
- Location/outside dimensions/use of proposed structures, driveways, parking areas -- distance between structures and setbacks to all property lines and surface waters
- Contour lines if the property is in a flood zone

PLOT PLANS MUST ALSO INCLUDE THE FOLLOWING, if applicable:

- Location/outside dimensions/use of existing structures: distance between structures and setbacks to all property lines and surface waters
- Location and name of surface waters within 50 feet of property
- Location of utility lines 115 kV or greater within 35 feet of property
- Unusual site features (e.g., hilly terrain, drainages) on property

NOTE: New development in the Swall Meadows area are required to submit a Wheeler Crest Design Review application.

The items checked above have been included on the submitted plot plan.



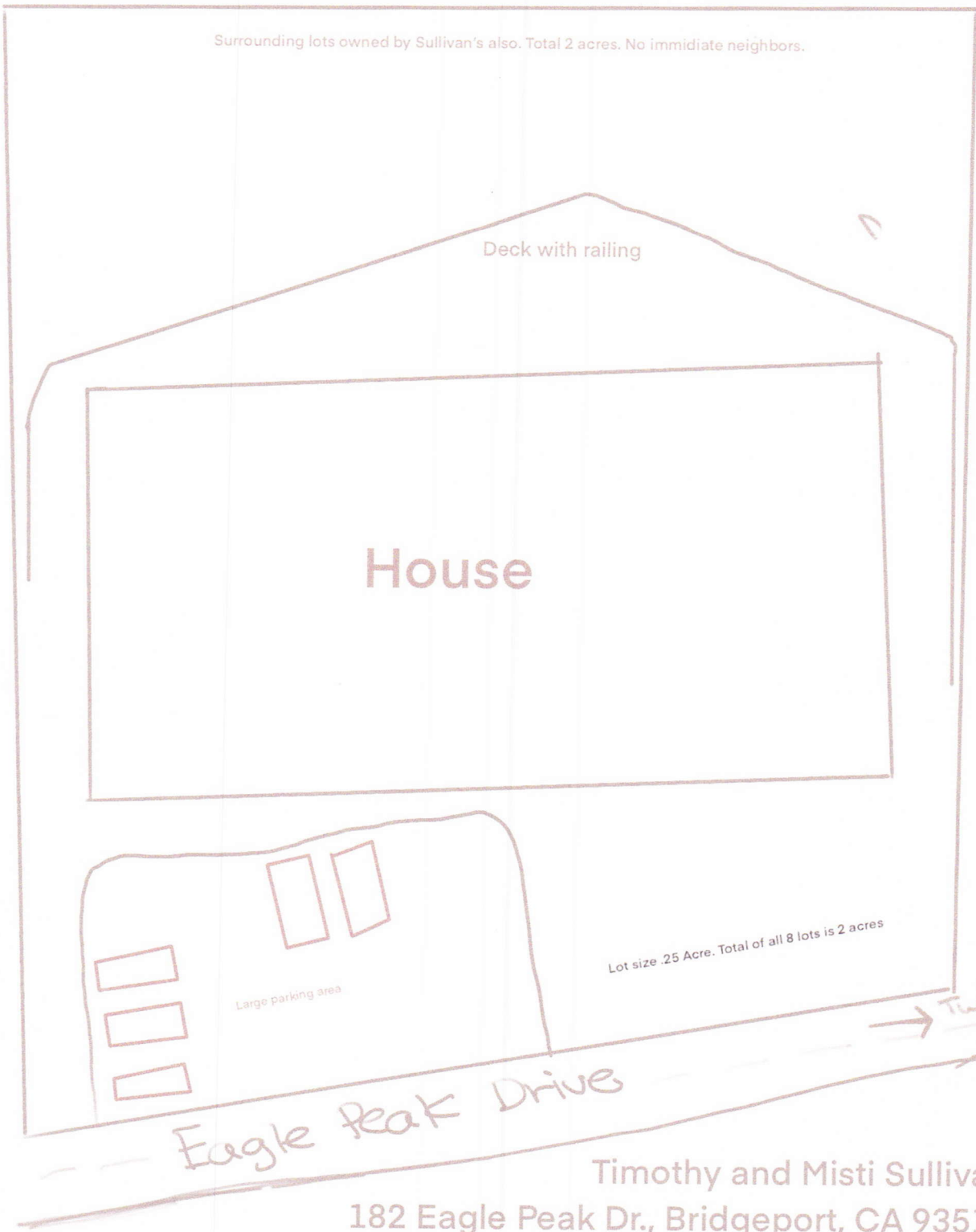
Signature of Applicant

12/3/21

Date

Buckeye Dr.

Surrounding lots owned by Sullivan's also. Total 2 acres. No immediate neighbors.



Timothy and Misti Sullivan
182 Eagle Peak Dr., Bridgeport, CA 93517
APN 010-313-003-000

N ←

Contact Phone 310-809-4003 / misti.sullivan@yahoo.com
Mailing address: PO Box 68, Bridgeport, CA 93517

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USE PERMIT
APPLICATION

APPLICATION # _____	FEE \$ _____
DATE RECEIVED _____	RECEIVED BY _____
RECEIPT # _____	CHECK # _____ (NO CASH)

APPLICANT/AGENT Timothy and Misti Sullivan

ADDRESS PO Box 68 CITY/STATE/ZIP Bridgeport, CA 93517

TELEPHONE (310) 809-4003 E-MAIL misti.sullivan@yahoo.com

OWNER, if other than applicant n/a (same)

ADDRESS _____ CITY/STATE/ZIP _____

TELEPHONE (_____) _____ E-MAIL _____

PROPERTY DESCRIPTION: 2 story, 4 bedroom home

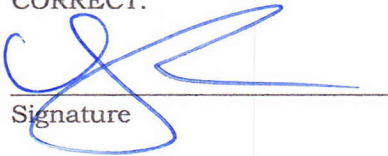
Assessor's Parcel # 010-313-003-000 General Plan Land Use Designation SFR

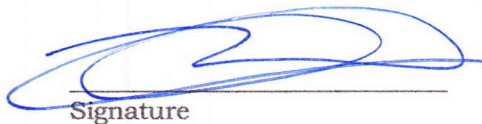
PROPOSED USE: Describe the proposed project in detail, using additional sheets if necessary.

NOTE: An incomplete or inadequate project description may delay project processing.

Property can only be accessed for 8 months a year. We would like to do short term rentals from April - November. There are no immediate neighbors to our property.

I CERTIFY UNDER PENALTY OF PERJURY THAT I am: legal owner(s) of the subject property (all individual owners must sign as their names appear on the deed to the land), corporate officer(s) empowered to sign for the corporation, or owner's legal agent having Power of Attorney for this action (a notarized "Power of Attorney" document must accompany the application form), AND THAT THE FOREGOING IS TRUE AND CORRECT.


Signature


Signature

12/3/21
Date