



County of San Diego, Planning & Development Services
AFFIDAVIT OF OPERATION FOR A HOST HOME
ZONING DIVISION

(Pursuant to Section 6156, Subsection bb. of the County Zoning Ordinance)

I/We declare that I am/we are aware of the provisions of the San Diego County Zoning Ordinance relating to Host Homes and requiring the filing of this Affidavit.

I/We declare that I/we occupy as my/our principal residence the premises at:

I/We declare that operation of the Host Home at the above mentioned residence will be in accordance with the following conditions:

1. A maximum of two bedrooms may be made available for rent.
2. The owner or lessee of the property shall operate the facility and reside in the home.
3. One off-street parking space for each room rented shall be provided in addition to the parking required for single-family occupancy.
4. Service shall be limited to the rental of rooms and the provision of breakfast for overnight guests. No food preparation or cooking for guests shall be conducted within any bedroom made available for rent.
5. Signs shall be limited to one on-premise sign not to exceed two square feet.
6. An adequate water well and sewage disposal system satisfactory to the County Department of Environmental Health shall be available, or letters from the appropriate water and sewer agencies indicating there is sufficient water supply and sewage treatment capacity for the proposed use shall be submitted by the applicant.
7. The primary access to the host home shall be via a publicly-maintained road.

I/We agree to the above conditions and consent to verification inspection of the premises by the Codes Compliance Officer of the Department of Environmental Health.

I/We agree to file a new Affidavit of Operation on the occasion of changes in ownership and upon request.

I/We acknowledge that these limitations on operation of a Host Home run with the property during the life of a valid Host Home Permit and will extend to any successor in interest.

I UNDERSTAND THAT IF THE OPERATION OF THE HOST HOME IS FOUND TO BE OTHER THAN DESCRIBED ABOVE THAT ANY PERMIT ISSUED IN RELIANCE SHALL BE SUBJECT TO REVOCATION.

Executed at _____, California this _____ day of _____, 20____.

City *Date* *Month* *Year*

Property Owner(s) _____

Signature *Signature*

_____ _____

Print Name *Print Name*

5510 OVERLAND AVE, SUITE 110, SAN DIEGO, CA 92123
For any questions, please email us at: PDSZoningPermitCounter@sdcounty.ca.gov
<http://www.sdcounty.ca.gov/pds>

