

HOTEL/MOTEL PERMIT TO OPERATE

RENEWAL APPLICANTS MUST SUBMIT THE FOLLOWING ANNUALLY:

1. Permit to Operate (PTO) Application (3 pages)
2. Police Clearance Form (1 page)
3. Bring or attach two (2) passport photos
4. Copy of Business License
5. Copy of current state-issued identification (i.e. Drivers License, Passport, etc.)
6. Proof of Pest Control clearance for the last 3 consecutive months
7. Fees

PER UNIT INSPECTION FEE

\$ 216.00	Hotel/Motel Permit Investigative Fee
\$	Hotel/Motel per Unit Inspection Fee
\$	TOTAL "RENEWAL" PTO Fees**

<u># OF UNITS</u>	<u>INSPECT FEE</u>
6-12 units	\$175.00
13-25 units	\$262.00
26-50 units	\$437.00
51-90 units	\$744.00
91 + units	\$962.00

NEW APPLICANTS MUST SUBMIT THE FOLLOWING ITEMS:

1. Permit to Operate (PTO) Application (3 pages)
2. Police Clearance Form (1 page)
3. Request for LIVE SCAN – Fingerprint (1 page)
4. Bring two (2) passport photos
5. Copy of current state-issued identification
6. Copy of Management Plan
7. Copy of Business License
8. Proof of Pest Control clearance for the last 3 consecutive months
9. Fees

PER UNIT INSPECTION FEE

\$ 216.00	Hotel/Motel Permit Investigative Fee
\$ 32.50	State Fingerprint Fee
\$ 20.75	City Fingerprint Fee
\$	Hotel/Motel per Unit Inspection Fee
\$	TOTAL "NEW" PTO Fees**

<u># OF UNITS</u>	<u>INSPECT FEE</u>
6-12 units	\$175.00
13-25 units	\$262.00
26-50 units	\$437.00
51-90 units	\$744.00
91 + units	\$962.00

The City of Stockton will annually send out the Permit to Operate Fee Invoice thirty (30) days prior to expiration. All required items must be submitted together and prior to the expiration to Neighborhood Services.

Questions? Contact Almarosa Vargas in Neighborhood Services at (209) 937-8952

Fingerprint Appointment: _____

Bus. Lic# _____

CURRENT YEAR _____

CITY OF STOCKTON
HOTEL, MOTEL AND/OR RESIDENTIAL HOTEL/MOTEL
PERMIT TO OPERATE APPLICATION

Residential Hotel/Motel

Hotel/Motel

New

Renewal

Name of Hotel/Motel: _____

Location Address: _____

Mailing Address: _____

Phone # _____ Fax # _____

Business License Holder: _____ Phone # _____

Mailing Address: _____

Property Owner: _____ Phone # _____

Mailing Address: _____

Lease Holder: _____ Phone# _____

Mailing Address: _____

Please list all Managers employed at this facility (attach additional paper if necessary):

Manager: _____ Phone# _____

Mailing Address: _____

1. Are you currently or have you ever owned/operated, managed or worked at a hotel, motel and/or residential hotel/motel? Yes No

- If so, please provide the following information and answer the following questions separately for each facility (you may attach an additional sheet of paper if necessary):

Name of facility(s): _____

Address of facility(s): _____

- How long did you own/operate or work at the facility(s)? _____
- What was your capacity at the facility(s) (i.e., Manager, desk clerk, etc.)? _____
- Was the facility(s) you listed above ever cited for health, safety, fire and/or building code violation(s)? Yes No
 - If so, were all corrections and/or repairs of those violations completed and approved within the time required on the citation? Yes No
- During your involvement with the facility(s), has there been repeat citations for health, safety and/or building code violations? Yes No
- In the past five years, has the facility(s) ever been cited for violations, and subsequently vacated due to corrections/repairs not being completed? Yes No

2. How many managers do you employ at your facility? _____

3. In the past three years, have you ever had a Permit to Operate denied, revoked or suspended within the State of California? Yes No

- If so, please provide the reason for denial, revocation and/or suspension and the location that the permit was denied, revoked and/or suspended: _____

4. Have you ever applied for a Permit to Operate using a different name? Yes No

- If so, please provide the other name: _____

5. As the property owner, operator, manager and/or lessee of a hotel/motel, within the last five years, have you terminated your lease, defaulted on your loan, or otherwise discontinued your association with the property while violations, as cited in a Notice of Violation, Notice and Order, Administrative Citation, etc., were still outstanding?

Yes No

- If so, please describe: _____

6. Are you currently on probation or parole? Yes No
- If so, are you required to register each year: Yes No
7. The Permit to Operate Application must include contact information for all manager(s) and/or other person(s) connected to the management of the business **(SMC §7-111.5)**
- Department of Justice Background Check Application
 - Two passport-size identity prints of the applicant
 - Written evidence that the applicant is 18 or older (i.e. copy of legal form of identification showing date of birth)
 - Proposed Management Plan
 - Pest Control Certification (must be dated not more than 30 days prior to application date)
 - Copy of Current Business License

Residential Hotel/Motel Applications MUST also include the following (§7-111.6)

- Request for variance for required Common Indoor Space (if applicable)
- Signed statement that the Residential Hotel/Motel shall not operate without an on-site Manager or designee in charge of the premises at all times.

I hereby certify under penalty of perjury that that above information is true and correct to the best of my knowledge and belief.

AUTHORIZED SIGNATURE

DATE

