0	Building and Safety	1685 Main S	Street Roo	m 111, Santa Monica,	CA 90401
	Report		lential E er 21RE	Building Record B-1132	
City of Santa Monica <sup>®</sup>	Expires six (6) months from Issuance Date. Issuance Date: 12/9/2021				
Property Owner's Name:	QUINN, ALFRED AND SYLVIA TRS		Zoning Classification:	R2	
Street Address:	2007 21ST ST, SANTA MONICA, CA 90404		Planning Cases:	RENT CONTROLLED, 62ZA189 -A	
Unit Number:					
Legal Description:	CAMPBELL VILLA TRACT LOT 2 BLK 2				
Historic Landmarks: No	Historic Districts: N	o H	listoric Stru	ctures of Merit: No	Historic Resources Inventory: Yes
Coastal Zone: No	Geologic Hazard Zone: No Noise Zone II or III? Yes				
Note: Any structure over 40 y	ears of age is subject	t to Landmar	rks Commi	ssion review prior to is	suance of a demolition permit.
Expired Permits:	NONE				
Seismic Gas Shutoff Device:	No				
Note: Building permits are Section 8.32.010(d) and (b)		mic Gas Shı	utoff devid	e per the City of San	ta Monica's Municipal Code
Pending Code Compliance Cases:		NONE			
Note: For information on pen	ding Code Complian	ce cases, ple	ease call (3	310) 458-4984.	
Permitted No. of Dwelling Units:		4			
Authorized Use(s):		DWELLING WITH GARAGE, 3-UNIT APARTMENT BUILDING			
Building Permits establishing authorized use:		B944, B945, B31335			

**Rent Control Restrictions:** Residential property may be subject to restrictions on rent. Purchasers may be liable for outstanding registration fees. Before purchase, call the Rent Control Board at (310) 458-8751 for status and rent levels of this property. Building permits are required for the number of rent-controlled units that exceed the legal number of dwelling units permitted above.

I hereby certify that the review of official city records of the City of Santa Monica Planning and Community Development Department pertaining to the above designated property revealed the information presented above.

Todd Weldon	12/9/2021				
Permit Specialist	Date				
Receipt by Buyer or Transferee					

Name of Buyer or Transferee: \_\_\_\_\_

Mailing Address:

I hereby acknowledge receipt of the Report of Residential Records for the above mentioned property. I have read and fully understand the above.

Date

Signature of Buyer

Please return a copy of the signed form to: City of Santa Monica | Rent Control | 1685 Main St. Room 202 | Santa Monica, CA 90401