



City of Temple City

ZONING CLEARANCE, OUTDOOR DINING

SUBMITTAL CHECKLIST

ITEMS REQUIRED

This checklist will be used by staff to determine if an application contains the appropriate requirements to begin the application process. All items listed below must be included for all applications. Certain types of application might require additional items, as specified on supplemental application forms. If any items are not included the project will not be accepted for submittal. This checklist does not determine a project complete for purposes of the Permit Streamlining Act.

- Completed *Zoning Clearance Application*.
- Site Plan*. Use an aerial map from Google maps or the Los Angeles County Assessor's Office to as a base map. Show on the map where the dining area will be located. Show the location:
 - Tables
 - Tents or canopies
 - Umbrellas
 - Other outdoor furniture
 - Fencing
 - Entry and exit points
- Pictures of the Site*. Pictures may be submitted digitally in the following formats: JPEG, BMP, or TIF. Or, import the pictures into a Microsoft Word file.
- Property Owner Approval*. Letter from the property owner approving the proposed site plan and furniture.
- Encroachment Permit*. If proposing outdoor dining on a public sidewalk, submit an encroachment permit.
- Neighboring Business Approval*. If proposing outdoor dining in front of a neighboring tenant, a letter from the owner of the neighboring business approving the outdoor dining location.
- Menu*. If the business serves alcohol, provide a copy of the menu.



City of Temple City

ZONING CLEARANCE, OUTDOOR DINING

APPLICATION

PROPERTY INFORMATION

Business Address: _____

DESCRIPTION OF OUTDOOR DINING REQUEST (Please include proposed hours of operation; number of tables, chairs, and umbrellas; size of any tents or canopies; and if alcohol service will be provided.)

TYPE OF APPLICATION (Check all that apply)

- Outdoor dining on a private walkway
- Outdoor dining within a private parking lot
- Outdoor dining on a public sidewalk

TYPE OF BUSINESS (Check all that apply)

- Stand-alone building
- Part of a multi-tenant building or property
- Includes a drive through

BUSINESS INFORMATION

Square footage of existing business: _____

Indoor seating capacity: _____

Outdoor seating capacity: _____

Outdoor seating square footage: _____

Number of parking spaces that will be use: _____

Will the seating arrangement meet social distancing requirements? _____

APPLICANT INFORMATION

Applicant Name: _____
Business Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Cell / Other Phone: _____ E-mail: _____

PROPERTY OWNER INFORMATION

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Cell / Other Phone: _____ E-mail: _____

Note: Attach additional lists for multiple property owners. If the property owner or applicant is a trust, partnership, corporation or LLC, on a separate sheet, provide a listing of all persons that make-up the trust, partnership, corporation or LLC

APPLICANT CERTIFICATION

I hereby certify that the statements furnished in this application and in the attached exhibits present the data and information required for this initial evaluation to the best of my ability, and that the facts, statements, and information presented are true and correct to the best of my knowledge and belief. In addition, I understand that the filing of this application grants the City of Temple City permission to reproduce submitted materials, including but not limited to, plans, exhibits, and photographs, for distribution to staff, Commission, and City Council Members, and other Agencies in order to process the application, and to make those materials available to the public on the City of Temple City's web site and cable channel, notwithstanding Health & Safety Code § 19851 or any other provision of law. Nothing in this consent, however, shall entitle any person to make use of the intellectual property in plans, exhibits and photographs for any purpose unrelated to the City's consideration of this application.

Signature: _____ Date: _____
Name (*print or type*): _____ Phone: _____

