



# CITY OF SOLANA BEACH

635 SOUTH HIGHWAY 101 • SOLANA BEACH • CALIFORNIA 92075 • (858) 720-2400 • FAX (858) 755-1782

## TEMPORARY USE PERMIT APPLICATION (COVID-19 ECONOMIC RECOVERY)

Project Address: \_\_\_\_\_

Project Assessor's Parcel Number: \_\_\_\_\_

### A. APPLICANT INFORMATION & PROJECT SUMMARY:

1. Applicant's Name: \_\_\_\_\_  
(Last, First & Middle Initial and Company Name)

2. Applicant's Mailing Address: \_\_\_\_\_  
(Street, City, State & ZIP Code)

3. Applicant's Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

4. Applicant's Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

5. Preferred Method of Contact: \_\_\_\_\_

6. Applicant's Representative: \_\_\_\_\_

7. Representative's Address: \_\_\_\_\_

8. Representative's Telephone/Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

9. Representative's Email Address: \_\_\_\_\_

10. Project Description (Residential, Commercial, Industrial, or Mixed Use; number of structures, square footage, number of stories, etc.):  
\_\_\_\_\_  
\_\_\_\_\_

11. Are there any permits already granted for use of the property such as variances, major or minor use permits, site plans, county coastal use permits, State of CA Coastal Permits, etc.?: (reference number if any)  
\_\_\_\_\_  
\_\_\_\_\_

<b>FOR OFFICE USE ONLY</b>		
Application No: _____	General Plan: _____	Overlay: _____
Fee: N/A	Date Paid: _____	Zoning: _____
Related Projects: _____		Date Filed: _____
Conditions: _____		
_____		
_____		

**PROJECT AND APPLICATION INFORMATION:**

1. Facilities to be open: from \_\_\_\_ a.m. to \_\_\_\_ p.m. on weekdays;  
from \_\_\_\_ a.m. to \_\_\_\_ p.m. on weekends
2. Total number of employees \_\_\_\_\_  
Estimated Number of clients, customers or users each day \_\_\_\_\_
3. List proposed uses and square footages of each: \_\_\_\_\_
4. Will the project generate noise which could be heard outside the project area? \_\_\_\_\_  
Noise source? \_\_\_\_\_ Where? \_\_\_\_\_
5. Other \_\_\_\_\_
6. Will alcohol be served in temporary expansion areas?  YES  NO
7. Existing Occupancy \_\_\_\_\_ Proposed Occupancy \_\_\_\_\_
8. Site Plan required, showing existing area and proposed expansion area. Plans must be drawn to scale and must provide sufficient information to determine that sufficient access and egress can be maintained.
9. Additional information may be submitted and/or required to make a final determination.

**ENFORCEMENT:** Pursuant to SBMC Section 17.72.120(B) failure to satisfy any conditions of approval is subject to the imposition of penalties as set forth in SBMC Chapters 1.16 and 1.18 in addition to any applicable revocation proceedings.

**EXPIRATION:** The TUP will expire December 31, 2020 unless otherwise authorized by the resolution of the City Council or an extension of the application may be granted by the Director, subject to SBMC Section 17.72.110.

**INDEMNIFICATION AGREEMENT:** The Applicant shall defend, indemnify, and hold harmless the City, its agents, officers, and employees from any and all claims, actions, proceedings, damages, judgments, or costs, including attorney's fees, against the City or its agents, officers, or employees, relating to the issuance of this permit including, but not limited to, any action to attack, set aside, void, challenge, or annul this development approval and any environmental document or decision. The City will promptly notify the Applicant of any claim, action, or proceeding. The City may elect to conduct its own defense, participate in its own defense, or obtain independent legal counsel in defense of any claim related to this indemnification. In the event of such election, the Applicant shall pay all of the costs related thereto, including without limitation reasonable attorney's fees and costs. In the event of a disagreement between the City and Applicant regarding litigation issues, the City shall have the authority to control the litigation and make litigation related decisions, including, but not limited to, settlement or other disposition of the matter. However, the Applicant shall not be required to pay or perform any settlement unless such settlement is approved by the Applicant.

I hereby certify under penalty of perjury that I or my authorized representative have delivered the aforementioned items to the City of Solana Beach Community Development Department and accept the terms and conditions of approval.

\_\_\_\_\_  
Applicant or Authorized Representative's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant or Authorized Representative's Printed Name