



**Community Development Department
Planning Division**

8650 California Avenue
South Gate, CA 90280
Phone: (323) 563-9514

Permit # _____



OUTDOOR DINING TEMPORARY USE PERMIT APPLICATION

A properly executed **Permit Application along with a site plan, copies of the proprietor's Certificate of Insurance and Alcoholic Beverage Control license, if applicable**, must be submitted before a permit can be issued. Upon receipt of a complete application and required attachments, the initial review typically takes ten (10) business days to complete. If outdoor dining area is on public sidewalks or City property, an encroachment permit must be obtained from the Department of Public Works.

CHECK ONE:

- EXTENSION REQUEST WITHOUT CHANGES
- EXTENSION WITH CHANGES
- NEW REQUEST

CHECK ONE:

- ALCOHOLIC BEVERAGES TO BE SERVED IN OUTDOOR DINING AREA (attach ABC authorization)
- NO ALCOHOLIC BEVERAGES TO BE SERVED IN OUTDOOR DINING AREA

Applicant (Name of person): _____

Property Address: _____

Name of Business: _____

On-Site Contact Name(s): _____

On-Site Phone Number: _____

Total Number of Proposed Outdoor Seats/Tables: _____ Number of Seats/Tables Approved: _____

Total Square Footage of Outdoor Dining Area: _____

By signing this application below, I hereby certify that I am either the owner of record of the named property, or the owner of record authorizes this application. I, my heirs, successors and assigns agree to indemnify and hold harmless the City of South Gate and all City employees, agents, and officers from responsibility, damage or liability on account of injury or damage to persons or property growing out of or directly related to the use of City sidewalks or property. I agree to conform to all applicable federal, state and local laws of this jurisdiction. I authorize a City official to enter all areas of the right of way covered by my issued permit, at a reasonable hour, to inspect and enforce the code provisions applicable to this issued permit. I understand this permit is authorization for temporary use of outdoor dining and if the outdoor dining area includes the public sidewalk or City property, such will be used for dining purposes only, and the issuance of this permit does not confer or convey any property rights to my business or me. The City of South Gate reserves the right to revoke this permit, at any time, with or without cause at the discretion of the Director of Community Development or his designee.

Print Name of Applicant

Signature

Print Name of Property Owner, if different than Applicant

Signature

City and State

Zip Code

E-mail Address

Date

Phone Number

Approved by: _____
Community Development Director

Date

Expires (fill in date)