



# COUNTY OF SANTA CRUZ

## PLANNING DEPARTMENT

701 OCEAN STREET, 4<sup>TH</sup> FLOOR, SANTA CRUZ, CA 95060  
(831) 454-2580 FAX: (831) 454-2131

## Temporary Permit Application

Ensure that ALL required information is included with this application. If you do not have ALL of the required information, your application will not be accepted.

### Submittal Requirements

- Application
- Temporary Use Permit Guidance and Self-Certification Form
- Site Plan. Outdoor expansion of existing permitted uses requires the submittal of a site plan showing, at a minimum, existing buildings, parking areas, area(s) to be devoted to use expansion, distance to property lines, furniture. This site plan can be hand drawn.
- Owner-Agent Approval Form (if required)
- Application Fee (waived if complete application submitted on or prior to December 31, 2020)

**Email your application and other submittal requirements to:**

[PlanningTemporaryUsePermits@santacruzcounty.us](mailto:PlanningTemporaryUsePermits@santacruzcounty.us)

### Business and Property Information

BUSINESS NAME: \_\_\_\_\_

ASSESSOR'S PARCEL NUMBER (APN): \_\_\_\_\_  
(APNs MAY BE OBTAINED FROM THE COUNTY'S ONLINE GIS SYSTEM OR ASSESSOR'S OFFICE AT (831) 454-2002)

STREET ADDRESS: \_\_\_\_\_

### Applicant Information (Complete only if different from Owner Information)

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NO. (\_\_\_\_\_) \_\_\_\_\_ CELL PHONE NO. (\_\_\_\_\_) \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Owner Information**

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NO.(\_\_\_\_\_) \_\_\_\_\_ CELL PHONE NO. (\_\_\_\_\_) \_\_\_\_\_

EMAIL: \_\_\_\_\_

**On-Site Manager Information**

NAME: \_\_\_\_\_

PHONE NO. (\_\_\_\_\_) \_\_\_\_\_ CELL PHONE NO. (\_\_\_\_\_) \_\_\_\_\_

EMAIL: \_\_\_\_\_

*NOTE:*

*If the application submittal is made by anyone other than the owner, a signed Owner-Agent Approval Form (attached) or a property management agreement must be submitted with the application.*

**Description of Proposed Temporary Use**

***Include proposed activities, square footage of any expansion areas, location on the property, structures, parking stalls removed or added and percentage of parking proposed for temporary use, furniture, umbrellas/canopies, lighting, heating, etc.***

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**APPLICANT'S SIGNATURE**

I certify that I am the applicant and that the information submitted with this application is true and accurate to the best of my knowledge and belief. I understand that the County of Santa Cruz is not responsible for inaccuracies in information presented, and that inaccuracies may result in the revocation of planning permits as determined by the Planning Director.

I further certify that I am the owner or purchaser (or option holder) of the property involved in this application, or the manager, lessee, or agent fully authorized by the owner to make this submission, and that proof of such is on file with the Zoning Section.

I agree to indemnify, defend with counsel approved by the County, and hold harmless the County, its officers, employees, and agents from and against any claim (including all costs and fees of litigation) against the County, its officers, employees, and agents arising out of or in connection to this temporary permit, regardless of the County's passive negligence, but excepting such loss or damage which is caused by the sole active negligence or willful misconduct of the County.

I understand that the County of Santa Cruz has attempted to request everything necessary for an accurate and complete review of my proposal; however, after Planning staff has taken in the application and reviewed it further, it may be necessary to request additional information and clarification.

\_\_\_\_\_  
SIGNATURE OF OWNER OR AUTHORIZED AGENT

\_\_\_\_\_  
DATE

## TEMPORARY USE PERMIT GUIDANCE AND SELF-CERTIFICATION

The following items require verification to assure the temporary use is equipped and maintained to minimum safety standards. Verification can be performed by owner or use operator.

- Approval Time Limit.** Temporary Use approvals are valid for 180 days of consecutive use and are allowed to remain in effect until 30 days after the State’s Shelter-in-Place Order is terminated, unless subsequently extended by the County.
- COVID-19 Recovery Guidance.** Federal-, State- or County-issued guidance regarding COVID-19 Recovery for restaurants or other industries will be adhered to as long as State and County health orders are in effect.
- Outdoor Hours.** Outdoor operations will occur between 7 a.m. and 9 p.m., unless other hours are established by a use approval.
- Agency Approvals.** It is the applicant’s responsibility to ensure that approvals from other agencies are obtained as required. All activities on the property must maintain conformance with existing permits and licenses, except as modified by this Temporary Permit. This Temporary Permit does not legitimize unpermitted or illegal uses and structures, except as specifically allowed by this Permit. Permits or approvals may be required by other agencies, including, but not limited to the agencies listed below, and other state or federal agencies.
  - County Department of Public Works [here](#).
  - County Environmental Health Services [here](#).
  - County Health Services Agency [here](#).
  - County Parks, Open Space & Cultural Services [here](#).
  - State Department of Alcoholic Beverage Control [here](#).
  - Your local fire protection agency.
- Restaurant Use/Food Service.** Expansion or addition of food service and/or areas where food is served may require approval of Environmental Health Services. Contact Olga Zuniga at [olga.zuniga@santacruzcounty.us](mailto:olga.zuniga@santacruzcounty.us) or (831) 454-2762.

### Parking Lots

- No more that 35% of on-site parking required by SCCC 13.10.550 *et seq* will be converted to an expanded outdoor use.
- More than 35% and up to 65% of on-site parking required by SCCC 13.10.550 *et seq* will be converted to an expanded for outdoor use (requires additional planner review to ensure adequate parking is available).
- Public Right-of-Way.** Any use of the public right-of-way, including public sidewalks, must be approved by the County Department of Public Works and an encroachment permit may be required. Contact Travis Rieber at [travis.rieber@santacruzcounty.us](mailto:travis.rieber@santacruzcounty.us) or (831) 454-2160 and ask for encroachments.
- Parks.** Use of public parks requires special approval of the Parks, Open Space & Cultural Resources Department. Please contact Michael Hettenhausen at [michael.hettenhausen@santacruzcounty.us](mailto:michael.hettenhausen@santacruzcounty.us) or (831) 291-7004.
- Structures and Inspections.** Proposed structures and improvements may require a County building permit and some structures, such as canopies, require inspection. Electrical work also requires permits and inspections. It is the applicant’s responsibility to contact the Building Department if permits or inspections are needed.
- Americans with Disabilities Act.** Existing ADA-compliant paths and facilities must be maintained to meet minimum ADA standards as approved.

- Life Safety Requirements.** At least one 2A10BC rated fire extinguisher will be provided in an accessible visible location for outdoor operations using any number of tents. Points of ingress and egress will not be blocked for any reason. New outdoor operations cannot impede emergency access to any building, fire hydrant, or fire lane.
  
- Additional Conditions.** Based on the proposed temporary use description and the site plan, additional conditions may be added to the issued Temporary Permit by the Planning or other Departments, if necessary, to protect public safety and welfare.

I hereby certify that the safety standard conditions listed above are fully complied with and will be maintained in a useable and functioning condition. **Form must be signed by one of the following three parties.**

\_\_\_\_\_  
APPLICANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
OWNER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ON-SITE MANAGER (REQUIRES OWNER-AGENT APPROVAL FORM)

\_\_\_\_\_  
DATE

## OWNER-AGENT APPROVAL FORM

For persons other than the owner who wish to obtain a building, development, and/or other permit, the approval of the owner is required.

This is the County's authorization to issue a permit to the agent listed below:

**Agent:** NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP CODE: \_\_\_\_\_

TELEPHONE: (\_\_\_\_\_) \_\_\_\_\_ CELL #: (\_\_\_\_\_) \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Owner:** NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP CODE: \_\_\_\_\_

TELEPHONE: (\_\_\_\_\_) \_\_\_\_\_ CELL #: (\_\_\_\_\_) \_\_\_\_\_

EMAIL: \_\_\_\_\_

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF OWNER

\_\_\_\_\_  
ASSESSOR'S PARCEL NUMBER(S)

\_\_\_\_\_  
PROJECT LOCATION

Note: One Owner-Agent Approval Form will be required for each permit required. In the case where there is more than one owner of a parcel, the owner signing this form represents that he/ she has the consent from all other owners of the parcel. By signing this form, the owner is authorizing the agent to legally bind the owner to responsibility for payment of the County's cost for all actions related to noncompliance with permit conditions. The agent will be required to provide proof of service, by mail, to the owner of a copy of the executed acceptance of permit conditions.