



City of Duarte
COMMUNITY DEVELOPMENT DEPARTMENT
 1600 Huntington Drive
 Duarte, CA 91010
 Ph: 626-357-7931 | Fax: 626-358-0018
 www.accessduarte.com

Temporary Use Submittal Checklist

| | |
|-------------------------|--------------------------------|
| PROJECT ADDRESS: | PLANNER NAME: |
| APPLICANT NAME: | APPLICANT PHONE NUMBER: |

GENERAL INSTRUCTIONS

Application Pre-Screening

It is highly recommended that a planner conduct a pre-submittal screening of your proposed temporary use in order to determine which checklist items you will need to provide. The **Temporary Use Submittal Checklist** serves as a guide. A planner will meet with you and answer any questions regarding City processes, estimated timing, fees, and submittal requirements listed on the **Temporary Use Submittal Checklist**. You may call (626) 357-7931 to schedule an appointment to meet with a Planner.

Application Submittal

A Master Application shall be filed with the Community Development Department for approval of a temporary use. A Special Event requires a minimum of 10 days for review and other temporary use requests require a minimum of 30 days for review. A Planner will meet with you to review your application submittal, collect fees, and ensure that you have provided all necessary materials to complete a thorough review of your request. After you submit your application, the Planning Division will review your request with the appropriate City Divisions and Departments. It is recommended that you make an appointment with the Planning Division when you are ready to formally submit your complete application.

Application Review and Determination

Staff may only approve a temporary use that would be operated in compliance with DDC Section 19.124.080 (Finding and Decision). In approving a temporary use, staff may impose conditions of approval for the operation of the temporary use, and may affect: time period, hours, days, noise levels, location of temporary structures, waste collection, sanitary facilities, and may require on-site police/security and safety measures. You will be notified of any additional fees for any required law enforcement deemed necessary by the Public Safety Department for policing the proposed temporary use. You will receive a written approval from City staff that describes the terms of approval.

| REQUEST FOR TEMPORARY USE (CHECK ONE) | SUBMITTAL CHECKLIST |
|---|---|
| <input type="checkbox"/> Special Event (Min. 10-day review period) Includes outdoor sales and events, outdoor entertainment, fairs, arts and crafts exhibits, festivals, food events, community rummage sales, outdoor meetings and group activities, seasonal sales, car washes; held on private property (DDC 19.124.050). Event Date(s) _____ Event Hours _____ _____ <input type="checkbox"/> Indoor Event <input type="checkbox"/> Outdoor Event # _____ Parking stalls used for event # _____ Parking stalls remaining | <input type="checkbox"/> Master Application <input type="checkbox"/> Application Fee(s) <input type="checkbox"/> Project Description __ Describe Temporary Use (on <i>Master Application</i>) <input type="checkbox"/> Site Plan (8 ½" x 11 min, 11" x 17" recommended) # _____ Sets __ Show all buildings on the property, parking stalls and drive aisles __ Show location of items checked below __ Show all dimensions of Temporary Structures (Tents, Trailers, Canopies, etc): _____ |
| <input type="checkbox"/> Temporary Structure(s) (Min. 30-day review period) Associated Development Project Name _____ | |
| <input type="checkbox"/> Temporary Work Trailer (Min. 30-day review period) Business Name _____ | |
| <input type="checkbox"/> Off-site Contractors' construction sites. (Min. 30-day review period) Location of Construction Site _____ | |
| | <input type="checkbox"/> Check all applicable uses: __ Live Band __ D.J./Amplified Sound/P.A. __ Games __ Cameras/Photography __ Entertainment __ Balloons __ Jumper/Bouncer __ Vehicle Display __ Food Trucks __ Food Vendors __ Banners __ Carnival Rides __ Alcohol __ Other _____ |
| | <input type="checkbox"/> Signed Letter of Authorization from Property Owner(s) <input type="checkbox"/> Fire Department Approval (for Temporary Tents) <input type="checkbox"/> Other _____ |

| OFFICE USE ONLY | | | |
|---|--|--------------|----------|
| <input type="checkbox"/> Received Date: _____ | <input type="checkbox"/> Incomplete Date: _____ <input type="checkbox"/> Complete Date: _____ | Receipt No. | Case No: |
| Comments: | | | |
| PROJECT ADDRESS: | | CASE NUMBER: | |

| COMMUNITY DEVELOPMENT DEPARTMENT | |
|---|--|
| The request for a Temporary Use is: | |
| <input type="checkbox"/> Approved <input type="checkbox"/> without Conditions of Approval <input type="checkbox"/> with Conditions of Approval Approval Letter Date: _____ | <input type="checkbox"/> Denied Denial Letter Date: _____ |
| Comments: | |
| Signature: | Title: |
| Date: | |

| PUBLIC SAFETY DEPARTMENT (INCLUDES SHERIFF'S DEPT.) | |
|---|--------|
| The request for a Temporary Use is: <input type="checkbox"/> Approved <input type="checkbox"/> Denied | |
| Comments: | |
| Signature: | Title: |
| Date: | |

| FINANCE DEPARTMENT | |
|---|--------|
| The request for a Temporary Use is: <input type="checkbox"/> Approved <input type="checkbox"/> Denied | |
| Comments: | |
| Signature: | Title: |
| Date: | |