



**PRIVATE PROPERTY PERMIT
TEMPORARY EVENT
CD-8A
REFER TO CD-8 FOR ADDITIONAL
INFORMATION**

CITY USE ONLY

Approved _____
Name (print)
Permit # _____
Date _____
Conditions Yes () No ()

Signature

COVID-19/temporary outdoor activation activity (check if applicable)

CONTACT AND EVENT LOCATION:

Name of Business: _____ Setup Date: _____
 Address of Event: _____ Event Date: _____
 Contact Name: _____ Breakdown Date: _____
 Contact Cell / Email: _____ Event Hours: _____
 Event Description: _____
 (Attach additional pages if needed)
 Business License Yes () No () Business License #: _____
 Tent/ Canopy/ Membrane Structure, *no walls* () None () <700sf () >700sf (*If cumulatively >700sf, a [Tent Permit](#) is required)
 Tent/ Canopy/ Membrane Structure *with walls* () None () <400sf () >400sf (*If tent has at least one side and >400 sf, a [Tent Permit](#) is required)
 Alcohol: () No () Yes (*If yes, must comply with ABC permit requirements)
 Entertainment: () No () Yes (*If yes, please describe in the event description above and on site plan)

Business Owner Certification Statement: I certify that I am the **Business Owner** of the subject business and that all the above information is true and correct to the best of my knowledge. I agree to accept and abide by any conditions placed on the subject project as a result of approval of this application and to comply with federal, state and local laws, including public health orders. I agree to indemnify, hold harmless, and defend the City of Carlsbad and its officers and employees from all claims, damage or liability to persons or property arising from or caused directly or indirectly by the outdoor operation of the subject business. I agree to remove all improvements authorized by this permit by the date specified or when otherwise directed by the city. I hereby authorize a representative of the City of Carlsbad to enter upon the above-mentioned property for inspection purposes.

Signature _____ Date: _____

Print Name _____

Legal Property Owner Certification Statement: I certify that I am the **Property Owner** for the subject business location and that all the above information is true and correct to the best of my knowledge. I support the applicant's request for a permit to activate outdoor business operations on the private property identified in this application and owned by me.

Signature _____ Date: _____

Print Name _____

SITE PLAN: PRIVATE PROPERTY PERMIT APPLICATION (CD-8A)

In order to review applications in a timely manner, please submit a site plan of the proposed outdoor area. Plans may be drawn by hand but must show all relevant dimensions. Use of marked up aerial maps (Google, etc.) with your markups is acceptable. Scaled drawings may be required on complex events.

Please review the Submittal Requirements on page 1 for additional information.

Site Plan for (business name): _____