



# SPECIAL OUTDOOR USE PERMIT APPLICATION

CITY OF CLAREMONT  
DEPARTMENT OF COMMUNITY DEVELOPMENT  
207 HARVARD AVENUE, P.O. BOX 880  
CLAREMONT, CA 91711-0880  
(909) 399-5470

## TYPE OF USE

- Incidental Outdoor Display of more than 6 square feet
- Outdoor Seating on or adjacent to sidewalk

## TYPE OF APPLICATION

- First time application, \$ \_\_\_\_\_
- Annual renewal-in compliance, \$ \_\_\_\_\_
- Late renewal-in compliance; \$ \_\_\_\_\_ (plus \$ \_\_\_ late notice fee, if applicable)
- Annual review - non-compliant, \$ \_\_\_\_\_

NOTE: All permits granted are valid for one year and will be renewed annually if use is found to be in compliance with all applicable standards and conditions of approval upon payment of the annual fee

## **APPLICANT INFORMATION**

Name of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Applicant's Job Title: \_\_\_\_\_

Business Owner (if different from applicant): \_\_\_\_\_

Property Owner(s): \_\_\_\_\_ Phone: \_\_\_\_\_

Property Owner's Address: \_\_\_\_\_

## **PROPERTY INFORMATION**

Assessor Parcel Number(s): \_\_\_\_\_ Zoning: \_\_\_\_\_

General Plan Designation: \_\_\_\_\_ Current Land Use: \_\_\_\_\_

Existing Conditional Use Permit (or other special permits): \_\_\_\_\_

Brief Description of Outdoor Use for which permit is requested:  
\_\_\_\_\_  
\_\_\_\_\_

## **CERTIFICATION STATEMENT**

I acknowledge the filing of this application and certify that all of the above information is true and accurate. Further, I have familiarized myself with the relevant provisions of the Claremont Municipal Code.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

File Number:	Submittal Date:	Received by:
Fee:	Expiration Date:	Cashier Validation: