



City of Del Mar  
 Department of Planning and Community Development  
 1050 Camino del Mar  
 Del Mar, CA 92014

Phone: 858-755-9313 Fax: 858-755-2794  
 Hours: M-TH 1:00 pm – 5:30 pm  
 FRI 1:00 pm – 4:30 pm  
[www.delmar.ca.us](http://www.delmar.ca.us)

**SCP** - \_\_\_\_\_ - \_\_\_\_\_

Submittal Date: \_\_\_\_\_ Planner: \_\_\_\_\_

Fees: PL: \_\_\_\_\_ ENG: \_\_\_\_\_ GPF: \_\_\_\_\_ Noticing: \_\_\_\_\_

Receipt No.: \_\_\_\_\_ Related Projects: \_\_\_\_\_

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**Application Reviewed By:** \_\_\_\_\_ **Date Reviewed:** \_\_\_\_\_

## Sidewalk Café Permit Application

<b>APPLICATION:</b>	
Project Address:	
Assessor's Parcel No(s).	
Zoning:	Overlay Zone
Does project involve work within the public right-of-way:	<input type="checkbox"/> yes <input type="checkbox"/> no
:	
Applicant(s):	
Mailing Address:	
City / State:	Zip:
Phone No(s):	
Email:	
Signature(s):	
<b>OWNER (if not primary applicant listed above):</b>	
Owner:	
Mailing Address:	
City / State:	Zip:
Phone No(s):	
Email:	
Signature(s) (authorizing applicant to submit application):	
<b>APPLICANT'S REPRESENTATIVE (if applicable):</b>	
Applicant's Representative:	Del Mar Business License No.:
Mailing Address:	
City / State:	Zip:
Phone No(s):	
Email:	
Signature:	
<b>AUTHORIZATION (plan set copies):</b>	
I acknowledge that plan sets may be reproduced and distributed to City representatives and members of the public for project review purposes only.	
Signature:	

Date: \_\_\_\_\_

Application Number(s): \_\_\_\_\_ Site Address: \_\_\_\_\_

I, the undersigned owner (or authorized agent) of the property herein described, hereby make application for approval of the plans submitted and made a part of this application in accordance with the provisions of the City of Del Mar Ordinances, and I hereby certify that the information given is true and correct to the best of my knowledge and belief.

I understand that the requested approval is for my benefit (or that of my principal). Therefore, if the City of Del Mar grants the approval, with or without conditions, and that action is challenged by a third party, I will be responsible for defending against this challenge. I therefore agree to accept this responsibility for defense at the request of the City and also agree to defend, indemnify and hold the City of Del Mar harmless from any costs, claims or liabilities arising from the approval, including, without limitation, any award of attorney's fees that might result from the third party challenge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(if other than owner, must have letter from owner)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(if other than owner, must have letter from owner)

**PROJECT DESCRIPTION:**

Brief description of the proposed sidewalk café, including operating hours for food/beverage service.

Brief description of the proposed sidewalk café, including the number and type of tables, demarkation barriers to be installed and any other proposed construction or improvement to the right-of-way area. Please also submit accompanying photographs of the area of the right-of-way and of adjacent properties.

Photographs attached