

# Processing a Minor Temporary Use Permit (TUP)

## How to get started:

A **Minor Temporary Use Permit (TUP)** is required when you are planning a special event such as, but not limited to, sidewalk sales, tent sales, and Grand Openings. There are several things that you will need when processing your request for a Minor TUP.

**Check in at the Development Services Assistance Desk and obtain a Minor TUP packet.** Your application will be reviewed by the City of Moreno Valley, Business License Division, as well as the Planning Division. The site plan and related information will be plan checked to determine compliance with the Conditions of Approval as stated in the signed application attached to this cover sheet. Below is a summary of requirements:

### **BUSINESS LICENSE:**

- a) A **Seller's Permit** provides a resale number for reporting sales tax.
- b) A **Health Department Certificate** will be required if there will be food sales at your event.
- c) **Fictitious Business Name:** If you are not using your last name in your business name, you need to apply for a fictitious business name & provide proof of publishing your business with a newspaper of your choice. (See "Welcome to Moreno Valley Information Sheet")
- d) **Business License:** You must complete and process a business license with the City of Moreno Valley.
- e) If you are sub-contracting **individual vendors**, each vendor must have a current business license with the City of Moreno Valley. You must provide a list of each vendor, their address and Moreno Valley Business License number.

*NOTE: If Business License is unable to proceed with approval of your event due to additional information needed, we recommend that you take the time when you are here to see counter staff for additional requirements.*

### **PLANNING:**

- a) A **Detailed Site Plan** is required to show in detail a description of your event. See **Permit Submittal Requirements** included on the application for a list of details to include on your site plan.
- b) A **"Letter of Intent"** is required by the applicant discussing the event in detail with authorization from the property owner(s).
- c) If your event involves any animals, please provide a detailed list.

Attachments: Minor Temporary Use Permit Application  
Site Plan  
Written Consent Form  
Emergency Contact Information  
Welcome to Moreno Valley (general information)  
Business License Application



## **PERMIT SUBMITTAL REQUIREMENTS**

- Fully dimensioned site plan, identifying the following:
  - ✓ Nearest street intersection(s)
  - ✓ Location of onsite/offsite parking – **accessible spaces need to be clearly identified**
  - ✓ Location of vehicular and pedestrian access to the parcel (driveways)
  - ✓ Location of proposed lighting and fencing (fencing not to exceed 6 feet in height)
  - ✓ Location of fire hydrant(s); fire lanes; utility poles and pedestals on site
  - ✓ Label and locate all participating vendors
  - ✓ Location and dimensions of tents, canopies and the distance between temporary structures
  - ✓ Location of restrooms/portable bathroom facilities, and trash receptacles
  - ✓ Location of generators and temporary electrical poles (if any)
  - ✓ Location of any proposed signage (Total signage area not to exceed 80 square feet temporary signage is approved under a separate permit)
  
- Letter from property owner or leasing agent authorizing the proposed temporary event
  
- Letter of "Intent", describing the proposed event, including the following details:
  - ✓ Type of Event
  - ✓ Date(s) event will be held and hours of operations
  - ✓ Anticipated attendance
  
- Planning Division staff will fax a copy of the approved TUP to (951) 656-2662, if animals are involved with this approval.

## **CONDITIONS OF APPROVAL**

1. The merchandise sale is in conjunction with permanently "established businesses" on the premises of that business (or upon immediately adjacent common area of a shopping or commercial center. NOTE: This section does not apply to merchandise sales on the premises of a bank). MC 9.02.150 D1
  
2. Access to buildings shall **NOT** be obstructed.
  
3. Fire lanes or access to fire hydrants are **NOT** blocked or obstructed.
  
4. Title 24/ADA accessibility is maintained. A minimum of 4' sidewalk clearance adjacent to store fronts shall be maintained. All accessible parking is made available and **NOT** obstructed by merchandise or temporary structures.
  
5. Temporary structures, i.e. tents, canopies or the like having a combined square footage of 400 sq ft for canopies (without sidewalls), and 200 sq ft for tents (with sidewalls) are spaced a minimum of 20' apart. Minor TUP applications do not permit cooking under any temporary structure. **NOTE:** Should tents or canopies exceed the noted area or square feet or are less than 20' apart, a fire code permit will be required.
  
6. All driveway approaches, main drive aisles, and fire lanes shall **NOT** be obstructed.
  
7. There shall be **NO** activities conducted within the City of Moreno Valley's Public Right-of-way.

## **APPLICANT'S SIGNATURE**

I certify under penalty of perjury that all information in this application is true and correct, that any false or misleading information shall be grounds for denial, and I agree to comply with any and all Conditions of Approval.

Applicant \_\_\_\_\_

Date \_\_\_\_\_





# City of Moreno Valley Police Department

22850 Calle San Juan de Los Lagos

Moreno Valley, CA 92553

Phone: (951) 486-6700

FAX: (951) 486-6750

## EMERGENCY CONTACT INFORMATION

*In the event of an emergency at your place of business, we will contact you and have you respond.*

**DATE:** \_\_\_\_\_

Business Name: \_\_\_\_\_ Business Phone: \_\_\_\_\_

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

Cross Street: \_\_\_\_\_ Alarm: Yes No Audible Silent Both

Alarm Co. Name: \_\_\_\_\_ Alarm Co. Phone: \_\_\_\_\_

Alarm Co. Address: \_\_\_\_\_

### Emergency Contact:

1. \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

2. \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

3. \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

**Type of Business:** Commercial Building Home Occupation Peddler/Solicitor

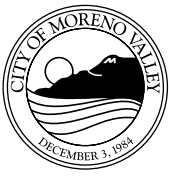
Other \_\_\_\_\_

### Hazards/Special Instructions:

\_\_\_\_\_  
\_\_\_\_\_

-OFFICE USE ONLY -

Beat \_\_\_\_\_ Reporting Dist. \_\_\_\_\_ Date \_\_\_\_\_ By \_\_\_\_\_



# CITY OF MORENO VALLEY

14177 Frederick Street • P.O. Box 88005 • Moreno Valley, CA 92552-0805  
Phone: 951.413.3080 • Fax 951.413.3096

### Please Check One

- New Application
- Change of Address
- Change of Business Name

## BUSINESS LICENSE APPLICATION

PLEASE TYPE OR PRINT CLEARLY:

**Business Name** \_\_\_\_\_

**Business Location** \_\_\_\_\_  
(No P. O. Box)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Mailing Address** \_\_\_\_\_  
(If Different)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Health Permit No.** \_\_\_\_\_

**Bus. Phone** ( ) \_\_\_\_\_ **Bus. Fax** ( ) \_\_\_\_\_

**Cell No.** ( ) \_\_\_\_\_

**E-Mail Address** \_\_\_\_\_

**No. of Employees** \_\_\_\_\_ (F/T) \_\_\_\_\_ (P/T)

**Ownership:**  Corporation  Ltd. Liability Corp.  Partnership  Sole Proprietor  Trust

<b>Date business started:</b> _____	<b>Description of Business:</b> _____
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**State Lic. No.** \_\_\_\_\_ **License Type** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_

**Resale No.** \_\_\_\_\_ **Federal I.D. No.** \_\_\_\_\_ **State I.D. No.** \_\_\_\_\_

ENTER BELOW NAMES OF OWNERS, PARTNERS, OR CORPORATE OFFICERS - Attach additional page if necessary

**Corporate or Owner Name** \_\_\_\_\_ **Title** \_\_\_\_\_ **Phone** ( ) \_\_\_\_\_

**Home Address** \_\_\_\_\_ **Cell Phone** ( ) \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Social Security No.** \_\_\_\_\_ **Driver's License No.** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Corporate or Owner Name** \_\_\_\_\_ **Title** \_\_\_\_\_ **Phone** ( ) \_\_\_\_\_

**Home Address** \_\_\_\_\_ **Cell Phone** ( ) \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Social Security No.** \_\_\_\_\_ **Driver's License No.** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

### EMERGENCY CONTACT:

**Name** \_\_\_\_\_ **Title** \_\_\_\_\_ **Phone** ( ) \_\_\_\_\_

**Address** \_\_\_\_\_ **Cell Phone** ( ) \_\_\_\_\_

If your surname is not included in the name of your business, you will need proof of a fictitious name registration and publishing or articles of incorporation.

If your business requires a resale number or any type of license or permit, you will need to provide documentation that you have completed these required actions.

All of the above requirements must be completed before processing of the business license application can be initiated.

All businesses are subject to audit.

### CALCULATE GROSS RECEIPTS TAX: Office Use Only

(1) Enter current year's Gross Receipts \$ \_\_\_\_\_

(2) Gross Receipts Tax Rate \$ \_\_\_\_\_

(3) Gross Receipts Tax Due \$ \_\_\_\_\_  
(TOTAL of line 1 x line 2)

### CALCULATE TOTAL OF FEES AND TAX DUE:

**Required Processing Fee** \$ **61.00**

**Gross Receipts Tax Due** \$ \_\_\_\_\_  
(ENTER AMOUNT FROM LINE 3 ABOVE;  
IF LINE 3 ABOVE IS \$99.99 OR LESS, ENTER ZERO)

**No. of business vehicles** \_\_\_\_\_ x \$6.00 \$ \_\_\_\_\_

**TOTAL AMOUNT DUE** \$ **1.00**

**TOTAL AMOUNT DUE** \$ \_\_\_\_\_

I hereby certify, under penalty of perjury, that the information in this application is true, correct, and complete to the best of my knowledge and belief. I agree to comply with all applicable laws and ordinances regulating the operation of this business.

**Signature of Owner or Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For Office Use Only**

Order of Approval	Department	Date	Permit # Home Occ # Encroach #, etc.	Expires	Approved By
	Planning				
	Building				
	Police				
	Health				
	Fire				
	Fictitious Name				
	Proof of Publication				
	Articles of Incorporation ID #				

**Comments:**