



Brea Civic & Cultural Center | 1 Civic Center Circle | Brea, California 92821 | [www.cityofbrea.net](http://www.cityofbrea.net)

### TEMPORARY USE PERMIT APPLICATION

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

Please submit a completed application and site plan **45 days** prior to the proposed event date. There is a **deposit of \$500 for temporary use permits**. Other fees apply as applicable. A completed application shall include a site plan.

**\$500 deposit required**

#### APPLICANT INFORMATION:

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

Organization's Name (if applicable): \_\_\_\_\_

Email: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

#### EMERGENCY CONTACT INFORMATION:

Contact #1

Contact #2

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

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

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

*\*Two emergency contacts are required and should be available **during** the event.*

<b>STAFF USE ONLY</b>		
Accela Record Number:	Trust Account Number:	
<b>TUP File Number(s):</b>	<b>Related Files:</b>	
<i>SUBMITTAL INFO:</i>		
Date Time Received:	Received by:	\$500 Deposit Received:

## EVENT INFORMATION:

Name of Event: \_\_\_\_\_ Event Type: \_\_\_\_\_  
Date(s) of Event: \_\_\_\_\_ Set-Up time: \_\_\_\_\_  
Hours of Event: \_\_\_\_\_ Clean-Up time: \_\_\_\_\_  
Location of event (address): \_\_\_\_\_  
Estimated number of Attendees: \_\_\_\_\_

## SUBMITTAL CHECKLIST:

### **APPLIES TO ALL APPLICATIONS**

- COMPLETED TEMPORARY USE PERMIT (TUP) APPLICATION**
- EVENT DESCRIPTION**

In a separate attachment, provide a description of your event. Please include event details selected or checked in the section below.

- SITE PLAN**

The site plan should include the following, but is not limited to:

- Shows the entire parcel with property lines
- Identify the adjacent streets
- Identify the event space
- Parking
- North arrow
- Include location of events details (tents, stages, barricades, music, generator, restrooms, rides, etc.). Please include event details selected or checked in the section below.

### **ADDITIONAL EVENT DETAILS**

Select all the details from below that apply to your event. If supplemental information is required please attach to the application, and or, contact the department to obtain any additional permits needed.

- TENTS OR CANOPIES:**

If yes, provide size and number (show on site plan): \_\_\_\_\_

- Provide anchorage details for tents greater than 120 square feet. (When support posts are spaced 12 feet apart or more in any direction, 10 feet or higher and tent area exceeds 600 square feet then structural design, calculations and details are required and shall be prepared by a licensed civil or structural engineer registered in the state of California. Depending on the Tent/Canopy configuration and size an anchorage testing report might be required).
- Tents or canopies with a total area of more than 400 square feet require a separate Fire Department permit and inspection. Please contact the Fire Department at (714) 990-7655 or [breafirepermits@cityofbrea.net](mailto:breafirepermits@cityofbrea.net) and submit a Special Events Permit application to them. The permit application is required to be submitted **minimum 3 weeks before** the event date and it can be found [here](#).

- ELECTRICAL HOOKUPS:**

If yes, describe: \_\_\_\_\_

- Installation of a temporary power pole requires a building permit and a building inspection. Please contact the Building & Safety Division at (714) 671-4406 or [building@cityofbrea.net](mailto:building@cityofbrea.net) and submit a building permit application, which can be found [here](#).

**BOOTHS, BLEACHERS, OR STAGES:**

If yes, describe and provide size and number: \_\_\_\_\_  
\_\_\_\_\_

Select those that apply below.

- For stages equal to or less than 30 inches in height, provide:
  - Installation drawings from manufacturer
  - Installation statement from installer stating installation will be installed per manufacturer’s installations instructions and specifications.
- For stages taller than 30 inches in height, provide:
  - Structural design and calculations prepared by a licensed civil or structural engineer registered in the state of California.
  - Completed installation verification report prepared by the engineer of record or a deputy special inspector is required. \*\*See the last page of this TUP application for this form.
- For stages accessible to the public, an ADA complaint ramp will be required.
- For stages with a columns and truss support system for lighting, sound, and/or banners, provide structural design and calculations prepared by a licensed civil or structural engineer registered in the state of California.

**GENERATORS:**

If yes, provide the number and fuel supply size: \_\_\_\_\_  
• If the fuel supply size exceeds 5-gallons, requires a Fire Department Special Events Permit.

**ON-SITE COOKING:**

If yes, describe: \_\_\_\_\_  
\_\_\_\_\_

- Requires Special Events Permit submitted to the Fire Department. See below for Fire Department contact information and application [here](#).

**ENTERTAINMENT:**

If yes, describe: \_\_\_\_\_  
\_\_\_\_\_

- Will there be live entertainment and/or PA system (i.e. DJ, band, amplified sound). Please describe and locate on site plan.

**SIGNS:**

If yes, provide the size, number, location and type of signs. No signs are allowed on the public right-of-way (street or sidewalk).

- Directional signs:  
Please describe \_\_\_\_\_  
\_\_\_\_\_
- Event-related temporary signs: (i.e. banners, freestanding signs)  
Please describe \_\_\_\_\_  
\_\_\_\_\_
- Requires a Temporary Sign Permit (TSP) [here](#) with your application to the Planning Division.

**STREET CLOSURES:**

If yes, identify the streets/alleys and describe they will need to be closed: \_\_\_\_\_  
\_\_\_\_\_

- Prior to TUP issuance, requires Public Works Encroachment Permit. Please contact Public Works at (714) 990-7691 or [pwencroachmentpermit@cityofbrea.net](mailto:pwencroachmentpermit@cityofbrea.net). Their website can be found [here](#).

**ALCOHOL SERVICE:**

If yes, provide an alcohol management plan and security information.

- Contact the California Department of Alcoholic Beverage Control (ABC) and obtain necessary ABC permits.

**VENDORS:**

If yes, provide a vendor list with your application.

Merchandise

Food

- Contact OC Health Care Agency and obtain necessary health permit. Their information can be found [here](#).

**PETTING ZOO OR ANIMAL EXHIBITS**

- Contact OC Animal Care and obtain necessary permits. Their webpage can be found [here](#).

**SPECIAL REQUESTS (optional)**

Please describe \_\_\_\_\_

**BUSINESS LICENSE TAX APPLICATION:**

All vendors hired by a TUP applicant to provide services at their event must obtain a City of Brea business license tax certificate **before** the TUP can be approved. Please apply online at <https://brea.hdlgov.com/Home/Index>. For any questions about the business licensing process and fees, you may contact [brea@hdlgov.com](mailto:brea@hdlgov.com) or (714) 886-6314.

**CERTIFICATE OF INSURANCE AND ENDORSEMENT:**

**Is this event located on public property (e.g., public street)?**

- If yes, the Applicant is required to provide a certificate of insurance and required endorsements for the event. Applicable policies must provide endorsements naming the City of Brea as an additional insured, stating that coverage is primary and non-contributory and waiving rights of subrogation. Please see the table below for applicable event insurance coverage requirements:

Type of Insurance	Required	Coverage Amount
Commercial General Liability	Yes	<b>\$1,000,000 per occurrence/ \$2,000,000 aggregate for bodily injury, personal injury, and property damage</b>
Workers' Compensation and Employer's Liability	If employees are working the event	\$1,000,000 per occurrence for Employer's liability. Workers' Compensation in the amount required by California statute.
Liquor Liability	If alcohol is proposed to be supplied/sold	\$1,000,000 per occurrence/ \$2,000,000 aggregate
Automobile Liability	If automobiles are part of the event	\$2,000,000 per occurrence (any auto)/ \$2,000,000 aggregate

The TUP application will not be considered complete until the Applicant provides evidence of insurance coverage that is acceptable to the City. Please visit [CityofBrea.net/insurance](http://CityofBrea.net/insurance) for acceptable insurance coverage requirements.

**PROPERTY OWNER APPROVAL:**

**Must be read, filled in, and signed by the owner of the property or management company.**

\_\_\_\_\_ (owner/property management company) hereby grants full permission and approval for \_\_\_\_\_ (applicant) to hold a \_\_\_\_\_ (event) at \_\_\_\_\_ (location) on \_\_\_\_\_ (date).

Additionally, I have been notified of the full extent of the event proposed and agree to not hold the City of Brea responsible for any problems or concerns that may arise due to it.

\_\_\_\_\_  
Signature of owner or person authorized Date

\_\_\_\_\_  
Address Email Telephone

**INDEMNIFICATION AGREEMENT:**

**Please read, fill in, and sign at the bottom**

I, the undersigned, certify that I am the applicant in the foregoing application, that I have read the foregoing application and know the content thereof, and state that the same is true and correct to the best of my knowledge and belief, and further certify that if approved, I shall comply with each and every condition of approval.

Furthermore, \_\_\_\_\_, on behalf of \_\_\_\_\_ hereby agrees to defend, indemnify, and hold free and harmless the City of Brea, its elected officials, officers, employees, and agents, with respect to any and all liabilities, claims, suits, actions, losses, expenses or costs of any kind, whether actual, alleged or threatened, including the payment of actual attorney’s fees, court costs, and any and all other costs of defense.

\_\_\_\_\_  
Applicant’s Signature

\_\_\_\_\_  
Date

## CITY OF BREA CONTACTS

NOTE: Please contact the Planning Division at 714-990-7674 before calling any other City Departments.

### STAFF CONTACTS:

<b>Contact</b>	<b>Phone Number</b>
Planning Division <a href="mailto:planner@cityofbrea.net">planner@cityofbrea.net</a>	(714) 990-7674
Fire Department <a href="mailto:breafirepermits@cityofbrea.net">breafirepermits@cityofbrea.net</a>	(714) 671-3691
Business License <a href="mailto:brea@hdlgov.com">brea@hdlgov.com</a>	(714) 886-6314
Public Works Department <a href="mailto:pwencroachmentpermit@cityofbrea.net">pwencroachmentpermit@cityofbrea.net</a>	(714) 990-7691
Building & Safety Division <a href="mailto:building@cityofbrea.net">building@cityofbrea.net</a>	(714) 671-4406

### OUTSIDE AGENCY CONTACTS:

<b>Contact</b>	<b>Phone Number</b>
OC Animal Care	(714) 935-6848
Department of Alcoholic Beverage Control	(657) 205-3520
OC Health – Special Events Program	(714) 433-6080

## **INSTALLATION VERIFICATION REPORT**

(For stages taller than 30 inches in height or other event structures as directed)

Engineer of Record or Deputy Inspector Name: \_\_\_\_\_

License No.: \_\_\_\_\_

Company Name (If applicable): \_\_\_\_\_

Contact Person / Phone Number: \_\_\_\_\_

Inspection Location: \_\_\_\_\_

Schedule Date / Time of Inspection:  
\_\_\_\_\_

I certify that the event stage will be installed per the stamped, engineered drawings approved as part of the Temporary Use Permit. The installation inspection will occur prior to stage use and if inconsistent with approved plans, the stage will not be available for event use.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*If installation verification is performed by the engineer of record, then this report shall be stamped and signed by the Engineer of Record.

\*\*If installation verification is performed by a deputy special inspector, a copy of the ICC certification shall be included with this report.