



# ACCESSIBLE BUSINESSES PROGRAM TEMPORARY OUTDOOR BUSINESS PERMIT

## FILING INSTRUCTIONS FOR TEMPORARY OUTDOOR BUSINESS APPLICATION



The following instructions are intended to provide the necessary information for processing your Temporary Outdoor Business Permit Application in the quickest manner possible. Please note that the Applicant must submit the completed application and all required materials as described in this application to the Planning Division at City Hall, located at 11222 Acacia Parkway, Garden Grove, CA 92840. Email submittals will also be accepted, at [planning@ggcity.org](mailto:planning@ggcity.org).

Once approved, a Temporary Outdoor Business Permit is in effect for 60 days. This period may be renewed upon approval of a request to the Planning Division, and in accordance with all applicable State and local health orders. If you have any questions regarding this application and the submittal requirements, please contact the Planning Division at (714) 741-5312.

## SUBMITTAL REQUIREMENTS

Please submit the following plans and information to obtain a Temporary Outdoor Business Permit:

- 1 A completed Temporary Outdoor Business Application with property owner authorization. A letter from the property owner may substitute for a signature on the application.
- 2 A legible business area layout that includes basic dimensions, path of travel/exiting, and furnishings legend (minimum 8.5" x 11" size). Please refer to the Site Plan and Business Layout Design Checklist in the Temporary Outdoor Business Application.
- 3 A detailed Operational Plan. A sample form is provided as an attachment to the Temporary Outdoor Business Application.
- 4 A completed Encroachment Permit Application, if outdoor seating is proposed on City-owned right-of-way. A copy of the Encroachment Permit Application can be obtained from the Planning Services Division. For questions regarding the submittal requirements should be directed to the Public Works Department, Engineering Division at (714) 741- 5887 for the Encroachment Permit Application and submittal requirements.



**CITY OF GARDEN GROVE**  
**COMMUNITY AND ECONOMIC DEVELOPMENT DEPARTMENT**  
**11222 ACACIA PARKWAY**  
**GARDEN GROVE, CA 92840**  
**PLANNING DIVISION (714) 741-5312**  
**BUILDING & SAFETY DIVISION (714) 741-5307**  
**ENGINEERING DIVISION (714) 741-5887**  
[www.ggcity.org](http://www.ggcity.org)

## TEMPORARY OUTDOOR BUSINESS APPLICATION

In March 2020, in response to the outbreak of COVID-19, and under regulations from the State of California and the County of Orange, restaurants in Garden Grove were no longer allowed dine-in service. In response, the City of Garden Grove created the Accessible Eateries Program to allow for restaurants to provide seating on a temporary basis in outdoor locations. Now, as the COVID-19 pandemic continues, the City of Garden Grove is also allowing retail and service-type businesses to apply for a temporary outdoor location. Businesses may now temporarily convert portions of adjacent parking areas, walkways, patios, sidewalks, and public rights-of-way into business areas.

TEMPORARY OUTDOOR BUSINESS AREAS:		
Maximum sixty (60) days from permit issuance, plus renewals	Maximum 50% on-site parking spaces may be converted*	A physical barrier must be provided
Outdoor business area may not encroach into drive aisles	Outdoor business area must close with business' hours	Outdoor dining must maintain ADA accessibility
Comply with all CAL/OSHA and California Department of Public Health requirements	Encroachment permits are required for outdoor business in public right-of-way	ABC COVID-19 Temporary Catering Authorization License required for alcohol sales

\*Subject to City approval

CONTACT INFORMATION:	
Business Name: _____	Business License No.: _____
Business Address: _____	
Applicant Name: _____	
Applicant Phone: _____	
Applicant Email: _____	
Property Owner Name: _____	
Property Owner Phone: _____	
Property Owner Email: _____	
Type of Business	<input type="checkbox"/> Restaurant <input type="checkbox"/> Retail <input type="checkbox"/> Service <input type="checkbox"/> Other
Area(s) Used:	<input type="checkbox"/> Parking Area <input type="checkbox"/> Walk Way <input type="checkbox"/> Right-of-Way <input type="checkbox"/> Other
Daily Hours:	From: _____ To: _____
<input type="checkbox"/> Proof of Liability Insurance and Worker's Compensation (Only for Dining in Public Right-of-Way)	
<input type="checkbox"/> Encroachment Permit Application/Agreement (Only for Dining in Public Right-of-Way)	
<input type="checkbox"/> Copy of the site plan and dining layout, minimum 8.5" x 11"	
<input type="checkbox"/> An operational plan	

*The owner or representative of the business, and property owner, agree to conduct the temporary outdoor dining in accordance with the above and attached requirements, and acknowledges that the failure to comply with the subject conditions is a violation of the City Manager's Executive Order, and that legal action may be taken.*

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Landlord Approval\*: \_\_\_\_\_ Date: \_\_\_\_\_

\*A letter of authorization from the property owner may be submitted in lieu of a signature.

OFFICE USE ONLY:			PERMIT NO.: _____
Building Approval By: _____ Date: _____	Engineering Approval By: _____ Date: _____	Planning Approval By: _____ Date: _____	GGPD Approval By: _____ Date: _____



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### TEMPORARY OUTDOOR BUSINESS PLAN SUBMITTAL REQUIREMENTS:

#### SITE PLAN & LAYOUT DESIGN CHECKLIST

*The site plan/layout of the proposed temporary outdoor business area at a minimum shall show:*

<input type="checkbox"/> The location and dimensions of the proposed outdoor business area	<input type="checkbox"/> The locations and dimensions of all existing and proposed obstructions
<input type="checkbox"/> The proposed sizes, locations, number, and arrangement of all barriers, tables, chairs, fixtures, umbrellas, and other furnishings	<input type="checkbox"/> A minimum 4'-0" ADA accessible pedestrian path of travel from the storefront and the parking areas
<input type="checkbox"/> A description of the types, styles, and materials of all barriers, furnishings, umbrellas, lighting, and other furnishings, and fastening/weights	<input type="checkbox"/> A minimum distance of six feet (6'-0") between tables when in use
<input type="checkbox"/> The locations and descriptions of signage in compliance with applicable public health requirements	<input type="checkbox"/> Visual clearance of a 25'-0" right triangle from the curb line, when the business area is adjacent to driveways or on a corner lot
<input type="checkbox"/> Existing trees, lamp posts, or planters may not be removed or relocated	<input type="checkbox"/> If portable heaters are proposed, all applicable OCFA requirements must be met
<input type="checkbox"/> If umbrellas or canopy covers are provided, they must maintain a minimum 7'-0" clearance from ground level, not to exceed 10'-0"	<input type="checkbox"/> A temporary outdoor business area may only be located within the private property, unless an encroachment permit is obtained
<input type="checkbox"/> The use of mist systems or other devices spraying water is prohibited	<input type="checkbox"/> A maximum height of 3'-0" for physical barriers

#### INSURANCE AND WORKER'S COMPENSATION (FOR DINING IN PUBLIC RIGHT-OF-WAY)

*The Applicant shall, prior to participation in the Temporary Outdoor Dining Program shall thereafter maintain in full force and effect while participating in the program:*

<input type="checkbox"/> \$1 million commercial general liability insurance in a form, and to cover potential claims for bodily injury, death, or disability, and for property damage which may arise from or be related to the use of the public right-of-way for an outdoor dining area, naming the City, its officers, agents, and employees as additional insureds under the terms of the policy.	<input type="checkbox"/> Workers compensation insurance, in the amount required by California law, which includes a waiver of subrogation.
	<input type="checkbox"/> If the Applicant is providing sales of alcoholic beverages, \$1 million liquor liability insurance is required.

#### ADMINISTRATIVE REQUIREMENTS

*The Applicant agrees to the following:*

The plans and permit for a temporary outdoor business area shall be kept on the premises of the business for at all times.	Initials: _____	Each permit shall be personal to the permittee and is not transferrable, delegable, or assignable.	Initials: _____
The permit is only valid during the State's stay-at-home order. Once the order is lifted, the temporary outdoor business area must be removed.	Initials: _____	Once a temporary outdoor business area is removed, the applicant is responsible for returning the existing paving to its original state.	Initials: _____
The City shall have the right to suspend or prohibit the operation of a temporary outdoor business area at any time if necessary to safeguard the public health, safety, and welfare.	Initials: _____	A restaurant with an existing Conditional Use Permit and ABC license for on-sales of alcohol must comply with all applicable regulations for a COVID-19 Temporary Catering Authorization.	Initials: _____
For any outdoor business within the public right-of-way, an encroachment permit from the Engineering Division will be required. The applicant must comply with all applicable requirements for an encroachment permit.	Initials: _____		



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## OPERATIONAL PLAN

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

Business Hours: \_\_\_\_\_

Will alcohol be served? If yes, please provide ABC License Type, and CUP reference number. Has a COVID-19 Temporary Catering Authorization License been received from ABC? If yes, provide a copy of the Authorization.

Are you aware of the COVID-19 related health measures published by CAL/OSHA and the California Department of Public Health? How will they be implemented?

When the business is closed, how and where will the tables, chairs, fixtures, and other furnishings be stored?

How will patrons be able to enter the business area? Will a reservation be required? How will overcrowding be prevented?

Will takeout or curbside delivery options also be available? How will the parking and circulation be monitored to maintain health and safety?

In the instance traffic and parking lot circulation becomes hazardous, how will parking be managed?



City of Garden Grove  
11222 ACACIA PRKWY, GARDEN GROVE, CA 92840  
(714) 741-5887 TEL / FAX (714) 741-5578  
**RIGHT-OF-WAY ENCROACHMENT  
PERMIT APPLICATION/AGREEMENT**

**REQUIRED INFORMATION**

Project Location: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

CA State License No. \_\_\_\_\_

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

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

CELL PHONE: \_\_\_\_\_ Office: \_\_\_\_\_

Email: \_\_\_\_\_ (City Use) Permit No. \_\_\_\_\_

- Sketch / Plans for Scope of Work are Required
- Inspection is required 48 hours in advance
- Any interference with normal traffic movement shall have prior approval by the Traffic Engineering Division by providing a Traffic Control Plan for review.
- Number of anticipated working days \_\_\_\_\_

THE UNDERSIGNED HEREBY APPLIES FOR PERMISSION TO EXCAVATE, CONSTRUCT, CLOSE TRAFFIC LANES AND/OR OTHERWISE ENCROACH ON CITY PUBLIC RIGHT-OF-WAY FOR THE FOLLOWING PURPOSE:

\_\_\_\_\_  
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**INDEMNIFICATION, DEFENSE, AND HOLD HARMLESS:** Applicant agrees to defend, indemnify, hold free and harmless the City, its elected and appointed officials, officers, agents and employees, at the applicant's sole expense, from and against any and all claims, actions, suits, damage to property or injuries to or death of any person or persons, including attorney's fees or other legal proceedings brought against the City, its elected and appointed officials, officers, agents, and employees arising out of the performance of the applicant, its employees, contractors, and/or subcontractors, of the work undertaken pursuant to this Permit. The defense obligation provided for hereunder shall apply without any advance showing of negligence or wrongdoing by the applicant, its employees, contractors, and/or subcontractors, but shall be required whenever any claim, action, complaint, or suit asserts as its basis the negligence, errors, omissions or misconduct of the applicant, its employees, contractors, and/or whenever any claim, action, complaint, or suit asserts liability against the City, its elected and appointed officials, officers, agents and employees based upon the work performed by the applicant, its employees, contractors, and/or subcontractors, under this PERMIT, whether or not the applicant, its employees, contractors, and/or subcontractors are specifically named or otherwise asserted to be liable.

**INSURANCE:** The contractor shall procure and maintain, during the entire term of this Agreement, the insurance coverage as set forth in the City's "Insurance Requirement for Contractors", attached hereto as Exhibit "A" and incorporated herein by this reference.

By signing this document the applicant affirms that they have the authority to act on behalf of the person/organization for whom this permit is being issued.

**Signed** \_\_\_\_\_ **Date:** \_\_\_\_\_

**IMPORTANT NOTICE**



Section 4216/4217 of the Government Code requires a Dig Alert Notification Number be issued before a "Permit to Excavate" will be valid. For your Dig Alert ID number call:

**DIG ALERT**

<https://www.digalert.org/home.htm>



**1-800-227-2600  
Two Working Days  
before you Dig**

## SUBJECT UNIT

TENANT UNIT #2

TENANT UNIT #1

WALK WAY

WALK WAY

LINE OF CURB

ACCESSIBLE PARKING PROHIBITED FOR SEATING AREA



PROVIDE ACCESSIBLE ROUTE TO AREA MIN. 48" WIDE THAT MEETS REQUIRED SLOPING

NO PARKING

BARRIER

BARRIER

BARRIER

BARRIER

BARRIER

BARRIER

PROPOSED DINING AREA

DELINEATE AREA OF OUTDOOR DINING

LOCATE BARRIERS OUT OF THE DRIVE AISLE

### TENANT INFORMATION TABLE

BUSINESS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

UNIT (IF APPLICABLE): \_\_\_\_\_

TENANT AREA (SQ FT): \_\_\_\_\_

### OUTDOOR DINING INFORMATION

AREA OF OUTDOOR DINING: \_\_\_\_\_

SURFACE MATERIALS: \_\_\_\_\_

NO. OF TABLE(S): \_\_\_\_\_

COVERED: (CIRCLE) YES/NO

NO. OF SEATING: \_\_\_\_\_

BARRIER TYPE: \_\_\_\_\_

HOURS OF OPERATION: \_\_\_\_\_



PROPOSED OUTDOOR DINING LAYOUT

[EXAMPLE] OUTDOOR DINING PLAN

# SUBJECT UNIT

TENANT UNIT #2

TENANT UNIT #1

## TENANT INFORMATION TABLE

BUSINESS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

UNIT (IF APPLICABLE): \_\_\_\_\_

TENANT AREA (SQ FT): \_\_\_\_\_

## OUTDOOR DINING INFORMATION

AREA OF OUTDOOR DINING: \_\_\_\_\_

SURFACE MATERIALS: \_\_\_\_\_

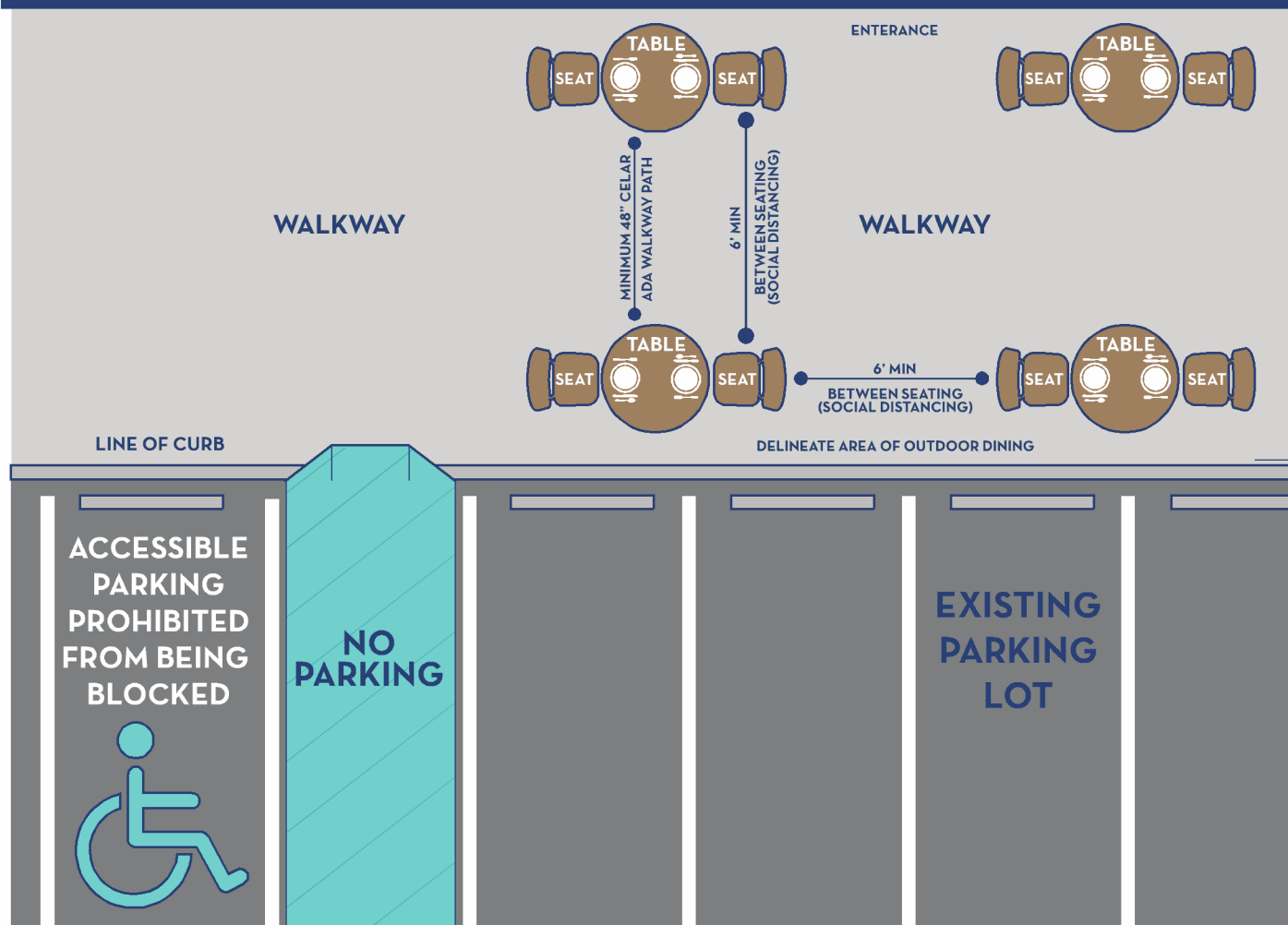
NO. OF TABLE(S): \_\_\_\_\_

COVERED: (CIRCLE) YES/NO

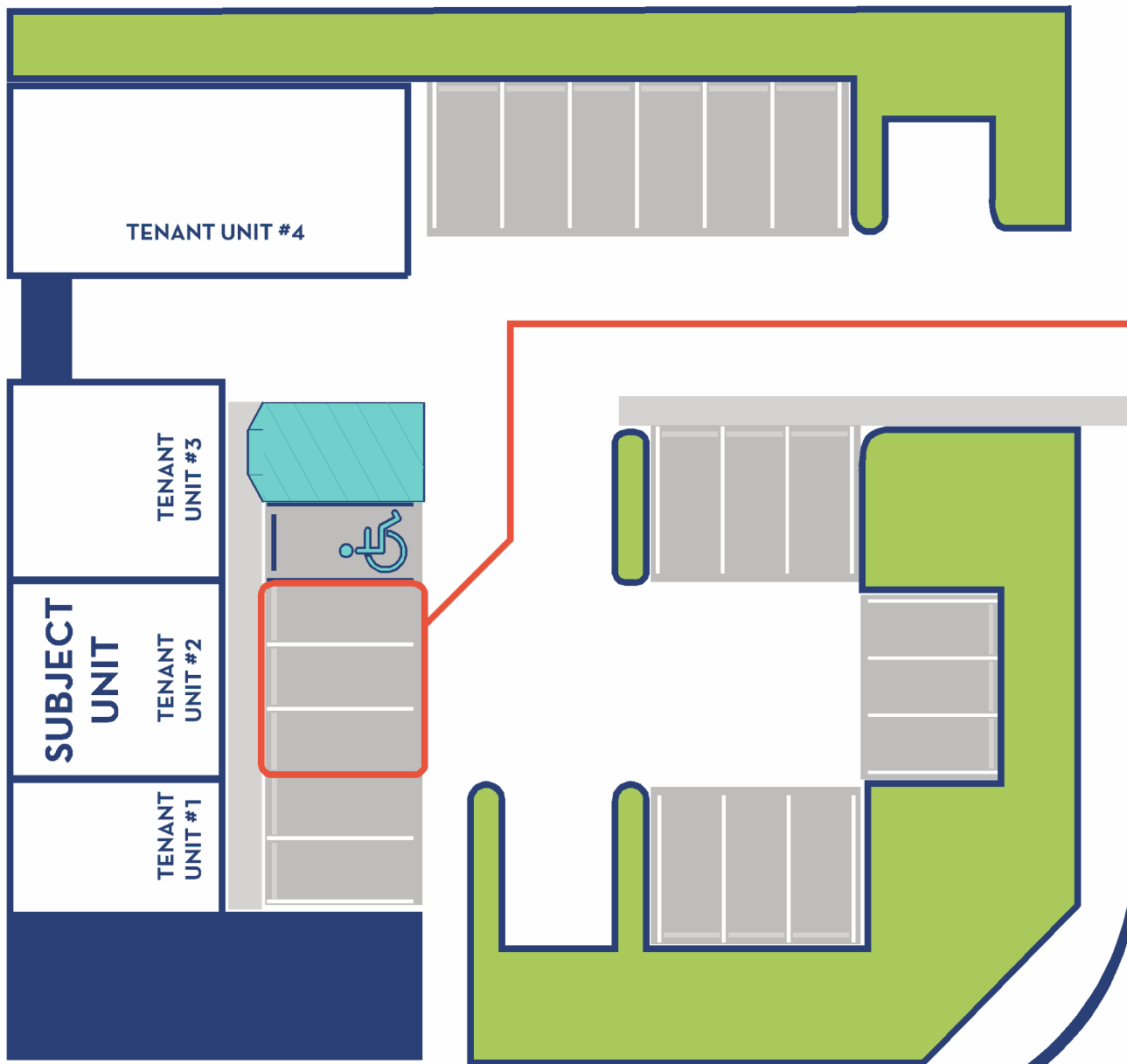
NO. OF SEATING: \_\_\_\_\_

BARRIER TYPE: \_\_\_\_\_

HOURS OF OPERATION: \_\_\_\_\_



[EXAMPLE] OUTDOOR DINING PLAN [ON WALKWAY]



[EXAMPLE] OUTDOOR DINING PLAN