



Application for Temporary Master License for New or Expanded Outdoor Operations

Restaurant/Retail Uses

(For use of Public Right-of-Way – also required to submit a Temporary Encroachment Permit Application)

Application Number _____ (for staff use)

Application to be filled out by business owner and property owner

Legal name of business			
Physical (business) address	City	State	Zip
Business Owners Name	Phone	Email	

24-HOUR CONTACT INFORMATION:

Business Contact's Name and Position (Please Print)	Signature		
Date	Phone (24HR)	Email	

PERMISSION FROM PROPERTY OWNER:

Property Owner's Name	Property Owner Address	City/State/ZIP	
Property Owner's Signature	Date	Phone	Email

PROPERTY OWNER'S AFFIDAVIT: I hereby certify under penalty of law that I am the owner of the above-referenced property and authorize the temporary outdoor restaurant/retail operations as described herein.

TYPE OF APPLICATION (check all that (apply):

<input type="checkbox"/> Restaurant, Micro-Brewery	<input type="checkbox"/> Outdoor Operations	<input type="checkbox"/> Sidewalk Encroachment	<input type="checkbox"/> Parking Area Modification
	<input type="checkbox"/> Retail Business		
<input type="checkbox"/> Street closure (Identify Streets):			

Application is hereby made for a Temporary Master License to operate an outdoor business subject to the City Manager's (or designee) sole consideration and approval and in accordance with standards set by the State of California, Contra Costa Health Services, and in compliance with City of Concord Municipal Codes, regulations and guidance.

Signature of Applicant/Business Owner	Signature of Property Owner	Date
---------------------------------------	-----------------------------	------

WRITTEN STATEMENT FROM BUSINESS OWNER:

ADDITIONAL INFORMATION:

Action Team Attendees/Approvals:

Date: