



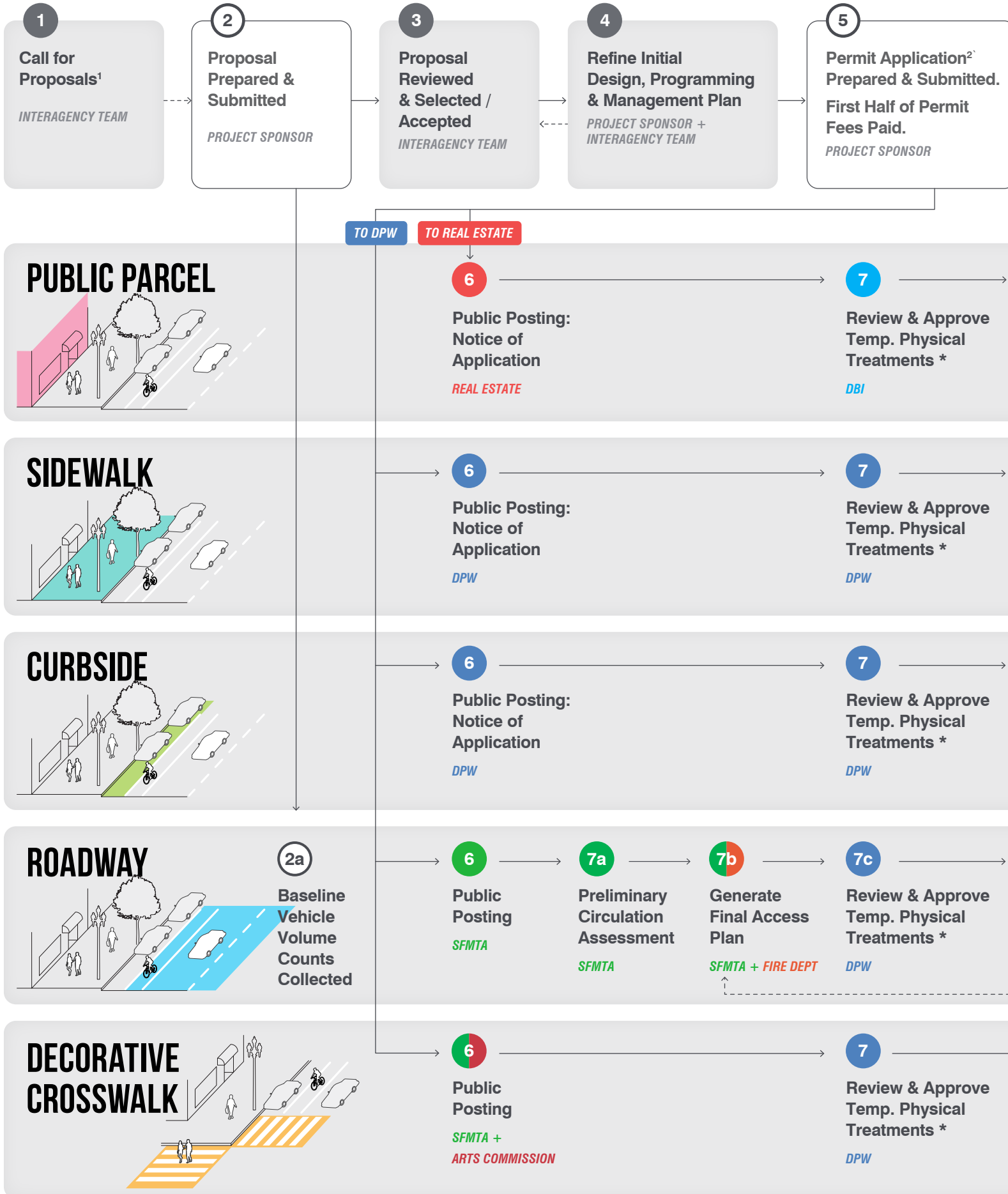
PLACES FOR PEOPLE PROPOSAL & PERMIT APPLICATION PACKAGE



City and County of
San Francisco

Version
04.11.2019

Places for People: Interagency Permitting Workflow



NOTES:

1. Not all projects will have a call for proposals
2. Food service or preparation will require separate permits from the Department of Public Health.
3. Final fee includes implementation fees



What types of projects can Places for People Permits be used for? Places for People Permits are for time-limited or temporary projects in San Francisco’s streets and underutilized lots. In order to qualify for use of the permit, Projects must be accessible to the public, involve a full-time stewardship entity that will also be the permit holder, and time-limited for up to twenty-four months. Permits may be extended for Projects with stewards in good standing.

Note that certain aspects of your proposal, for example anything involving food vending or preparation onsite, will require separate permits through the Department of Public Health. You will be directed to DPH if needed.

How to Use This Package and submit the required material: Use this package as a reference to prepare all of the information and documents required for submittal.

A complete Project Proposal must be submitted first. The proposal will be reviewed by the relevant City Departments. If the proposal is accepted, City Staff will work with you to refine the project. This may require you to revise these documents and submit them multiple times until they incorporate all of the City’s feedback.

You will then submit these documents with your *Final Submittal: Permit Application*, which consists of additional documents and forms.





Required Documents Checklist

FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
Project Working Name and Site:	Permit No:

Applicants: Only submit the forms that are necessary for your project type. The matrix below will help you understand which forms are needed. Once you have completed all the necessary forms, sign this checklist and place all the completed forms behind it.

First Submittal: Project Proposal

Submit these documents for your project proposal. Your proposal will be reviewed by the relevant City Departments. If your proposal is accepted, City Staff will work with you to refine the project. This may require you to revise these documents and submit them multiple times until they incorporate all of the City's feedback. You will then submit these documents with your *Final Submittal: Permit Application*.

A B C D E F G H I J K L M

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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Checklist														
Applicant Information														
Site Details and Photos														
Concept Description														
Programming & Activation														
Times of Proposed Closure														
Traffic Counts														
Proof of Notification														
Community Engagement														
Budget Worksheet														
Maintenance Plan														
Context Plan														
Site Plan(s)														

Final Submittal: Permit Application

Once your project proposal incorporates all the appropriate feedback from City Staff, you will submit all these documents in addition to the revised Project Proposal documents.

N O P Q R S T U

			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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								<input type="checkbox"/>		<input type="checkbox"/>
Color Curb Application *										
Color Curb Use *										
Occupancy Permit *										
Final Design Drawings										
Performance Bond										
Proof of Public Posting										
Proof of Insurance										
Host Agreement Form										

* Submit only as needed

Required for the following projects:

- Parcel
- Parcel
- Sidewalk
- Curbside
- Roadway
- Open Street

Please read the following and sign below.

I attest that personally identifiable information (PII) – i.e. social security numbers, driver’s license numbers, bank accounts – have not been provided as part of this application. Furthermore, where supplemental information is required by this application, PII has been redacted prior to submittal to the Planning Department. I understand that SF Planning is committed to the protecting the privacy rights of individuals, and that information provided to Planning Department becomes part of the public record and can be made available to the public for review and/or posted to Department websites.

APPLICANT SIGNATURE REQUIRED.

<i>Name:</i>	<i>Signature:</i>	<i>Date:</i>
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FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.

City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>



Applicant/Steward Information

FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
Project Working Name and Site:	Permit No:

Applicant Information

Name of Sponsoring Organization:			
Mailing Address:			
City / State:		Zip Code:	
Is the Sponsoring Organization a nonprofit 501(c)3? <input type="checkbox"/> YES <input type="checkbox"/> NO		If not, do you have a nonprofit fiscal sponsor? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Contact Name 1:		Contact Name 2:	
Title:		Title:	
Phone:		Phone:	
Email:		Email:	

Other Stakeholders / Project Partners

Name of Stakeholder or Stakeholder Entity 1:			
Relationship to Proposed Project:			
Contact Name:		Phone:	
Title:		Email:	
Name of Stakeholder or Stakeholder Entity 2:			
Relationship to Proposed Project:			
Contact Name:		Phone:	
Title:		Email:	
Name of Stakeholder or Stakeholder Entity 3:			
Relationship to Proposed Project:			
Contact Name:		Phone:	
Title:		Email:	

APPLICANT SIGNATURE REQUIRED.		
Name:	Signature:	Date:

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curbside
- Roadway
- Open Street



No forms here :-)
This page was intentionally left blank.

FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.									
City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:



Site Details and Photos

FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
Project Working Name and Site:	Permit No:

If your project involves more than one site or street, please duplicate this form as needed to submit information for each site.

Proposed Site

Address and/or Street for proposed closure:		Zip Code:
Cross Street 1:	Cross Street 2:	
District #:	District Supervisor:	
Police Precinct:	NEED HELP? Supervisor district and precinct information can be found on: http://propertymap.sfplanning.org	

Ground floor uses directly fronting proposed closure (by parcel):

Retail:	Office:	Restaurant/Food:
Residential:	Industrial:	Institutional:
Open Space:	Vacant:	Transportation:
Other:		

Is there a bike lane adjacent to the proposed site? YES NO

Existing Area, Community, Neighborhood Plans or Initiatives related to the site or its context:

Sidewalk Information

Are there any colored curb segments in/alongside the proposed site? YES NO

	Red ■	Yellow ■	Blue ■	White 	Green ■
Length of curb:					

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curbside
- Roadway
- Open Street

Are there driveways fronting the proposed site? YES NO

Addresses of properties with driveways:	Driveway length:	Addresses of properties with driveways:	Driveway length:

Are there any fire hydrants around the proposed site? YES NO

Site Photos

Include photos taken from specific angles around the proposed site(s). Please submit as individual .jpg files using the naming convention shown.



- | | |
|---|--|
| <input type="checkbox"/> Building elevations for all of the fronting properties. Include the curbside lane and sidewalk | <input type="checkbox"/> Sidewalk gardens, treewells, trees |
| <input type="checkbox"/> Existing parking meters, utility poles, and signposts | <input type="checkbox"/> Sidewalk furnishings, benches, and bike racks |
| <input type="checkbox"/> Existing equipment cabinets and utility boxes | <input type="checkbox"/> Catch basins and at-grade valves, |
| | <input type="checkbox"/> Curb ramps, and pavement anomalies. |

APPLICANT SIGNATURE REQUIRED.

Name:	Signature:	Date:

FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.

City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:



Concept Description

FOR APPLICANT:

Project Working Name and Site:

FOR GOVERNMENT USE ONLY:

Permit No:

Provide a brief summary explaining your project goals and the vision for the Project. Why have you chosen this location? What activities would you like to promote? How do you anticipate the community will be involved in the creation and use of the new public space? 500 word maximum.

Describe your project here (500 word maximum):

Required for the following projects:

Private Lot

Public Lot

Sidewalk

Curbside

Roadway

Open Street



Describe your project here:

Large empty rectangular area for describing the project.

APPLICANT SIGNATURE REQUIRED.

<i>Name:</i>	<i>Signature:</i>	<i>Date:</i>
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FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.

City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>



Programming & Activation

FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
<i>Project Working Name and Site:</i>	<i>Permit No:</i>

- Provide a sample four week schedule for programming and activation. Submit multiples of this form as needed for multiple weeks and/or sites.
- Note events that happen routinely (weekly, biweekly, monthly, etc) as well as seasonal or one-time event possibilities.
- Indicate setup and breakdown times associated with the activities.
- When possible, identify the entities who might be involved with each event. You may also include images which communicate ideas of the desired activities.
- If you project involves more than one site or street, please duplicate this sheet as needed to submit information for each site.

Are you proposing any restricted access events? YES NO

If yes, please list the event(s) below. City code permits a maximum of eight restricted access events per calendar year.

	<i>Date of Restrictred Access:</i>	<i>Hours:</i>	<i>Purpose of Event:</i>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

If applicable, describe the type(s) of entertainment and/or amplified sound planned for the site.

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curb-side
- Roadway
- Open Street

Effective Dates: ___ / ___ / _____ to ___ / ___ / _____

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
8 - 9 AM							
9 - 10 AM							
10 - 11 AM							
11 AM - 12 PM							
12 - 1 PM							
1 - 2 PM							
2 - 3 PM							
3 - 4 PM							
4 - 5 PM							
5 - 6 PM							
6 - 7 PM							
7 - 8 PM							
8 - 9 PM							
9 - 10 PM							
10 PM - 8 AM							

If you project involves more than one site or street, please duplicate this sheet as needed to submit information for each site.



FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
Project Working Name and Site:	Permit No:

1. ALL VENUES

Business Organization Name:

Type of performance planned (if any) :

If you have provided personal residence contact information, please check below if you wish to keep your residence information private/confidential.

- YES. I wish to keep my personal information private.
- NO. Please disclose my personal residence address, phone, fax and email upon request by the public.

The programming and activation will take place in an (select all that apply):

- INDOOR VENUE. **Please fill out section 2.**
- OUTDOOR VENUE. **Please fill out section 3.**

2. INDOOR VENUES ONLY

List the Entertainment Permits previously issued for this premises:

Days and times of entertainment:

Type of food and/or beverage service (if any):

Do you have a liquor license? YES (If yes, please attach a copy including conditions.) NO

Occupancy (per SFFD/attach SFFD certificate if applicable):

Will the indoor venue have an open garage door? YES NO

3. OUTDOOR VENUES ONLY

Are you applying on behalf of another person, organization, or company responsible for the event (i.e., the Event Sponsor)? YES (If yes, provide contact info below.) NO

Contact Name:

Company/Organization:

Address:

City / State / Zip:

Email:

Business Phone: Mobile Phone:



3a. Will there be a sound-check?

YES NO

If so, list hours when sound check will occur:

From: _____ To: _____

3b. Will there be outdoor amplified sound?

YES NO

If yes, list hours when outdoor amplified sound will occur:

From: _____ To: _____

Type of outdoor sound to be amplified (e.g., live music, DJs, plays, dance acts, poetry recitations, fashion show):

Type: _____

Note: Hours of operation of outdoor sound equipment shall be no earlier than 9:00 a.m. and no later than 10:00 p.m., unless otherwise permitted by the Entertainment Commission. A public hearing may be required.

3c. If there is amplified sound, list the responsible person in direct control of sound equipment:

Full name (First, Last)

Mobile Phone:

Business Phone:

Mailing Address:

City / State:

Zip Code:

Sound Amplifying Equipment:

Rated Power Output:

3d. Will your activity take place within 300 feet of a hospital, school, place of worship, courthouse, mortuary, public library, or City Hall? (250 feet equals approximately one city block).

YES NO

If yes, please list all places and addresses:

3e. SF Police Department Conditions

SFPD district station to complete this section and email to Crystal.Stewart@sfgov.org or Fax to (415) 554-7934

District station comments by:

Star Number:

Zip Code:

Permit applicant hereby certifies that the business shall comply with the maximum noise levels as established under the Police and Health Codes for this premises.

APPLICANT SIGNATURE REQUIRED.

Name:

Signature:

Date:

FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.

City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:



Times of Street Closure

FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
<i>Project Working Name and Site:</i>	<i>Permit No:</i>

Street Name: _____ **Effective Dates:** ___ / ___ / _____ to ___ / ___ / _____

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
8 - 9 AM							
9 - 10 AM							
10 - 11 AM							
11 AM - 12 PM							
12 - 1 PM							
1 - 2 PM							
2 - 3 PM							
3 - 4 PM							
4 - 5 PM							
5 - 6 PM							
6 - 7 PM							
7 - 8 PM							
8 - 9 PM							
9 - 10 PM							
10 PM - 8 AM							

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curb-side
- Roadway
- Open Street

If your project involves more than one site or street, please duplicate this sheet as needed to submit information for each site.

No forms here :-)
 This page was intentionally left blank.

APPLICANT SIGNATURE REQUIRED.		
<i>Name:</i>	<i>Signature:</i>	<i>Date:</i>

FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.									
City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>



Traffic Counts

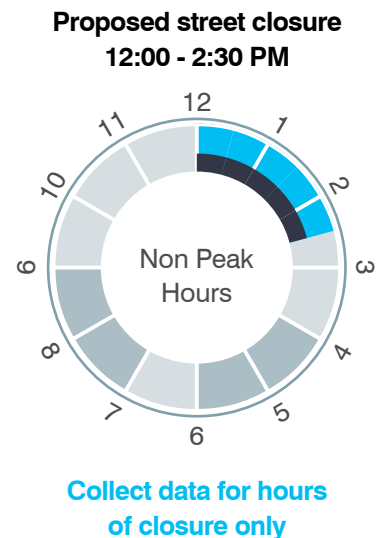
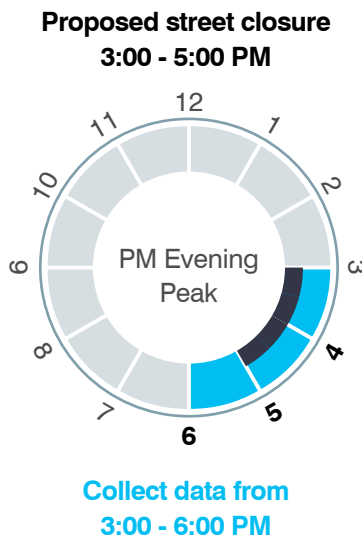
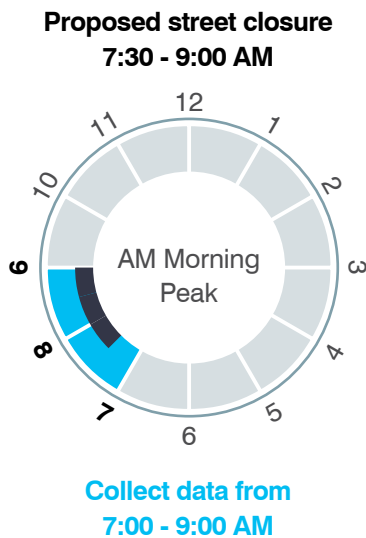
FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
Project Working Name and Site:	Permit No:

If the project proposes closing a street, or modifying existing traffic flows, you must collect information to help the City understand potential impacts of the closure.

- Collect information on the number of pedestrians and vehicles passing through the street(s) that is proposed for closure or modification of pre-existing traffic flows.
- Duplicate this sheet as necessary to submit data separately for each site.
- If your proposed time of closure overlaps with **peak morning (7:00 - 9:00 AM)** hours, collect data during the peak morning hours.
- If you proposed time of closure overlaps with **peak evening (4:00 - 6:00 PM)**, collect data during the peak evening hours.
- If your proposed time of closure does not overlap with peak morning nor peak evening hours, collect data during the hours of proposed closure only.
- If your proposed days of closure are weekday only, collect data on Tuesday and Wednesday for two successive weeks.
- If your proposed days of closure are weekend only, collect data on two successive Saturdays. Avoid holiday weekends.

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curbside
- Roadway
- Open Street



Date:	___ / ___ / _____			___ / ___ / _____		
	Pedestrians	Bicycles	Cars	Pedestrians	Bicycles	Cars
7 - 8 AM						
8 - 9 AM						
9 - 10 AM						
10 - 11 AM						
11 AM - 12 PM						
12 - 1 PM						
1 - 2 PM						
2 - 3 PM						
3 - 4 PM						
4 - 5 PM						
5 - 6 PM						
6 - 7 PM						

Please duplicate this sheet as needed.

APPLICANT SIGNATURE REQUIRED.		
Name:	Signature:	Date:

FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.									
City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:



Proof of Notification

FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
Project Working Name and Site:	Permit No:

You are required to notify the owners of properties fronting your project of your intent to submit a Places for People Permit Application. List all the entities you notified on this form. **Please attach a copy of the notification(s).**

Notified Parties

Addressee:			
Relationship to Project:			
Mailing Address:			
City / State:		Zip Code:	
Email Address:			
Format of Notification:	<input type="checkbox"/> Posted Letter	<input type="checkbox"/> Email	<input type="checkbox"/> Other:
Addressee:			
Relationship to Project:			
Mailing Address:			
City / State:		Zip Code:	
Email Address:			
Format of Notification:	<input type="checkbox"/> Posted Letter	<input type="checkbox"/> Email	<input type="checkbox"/> Other:
Addressee:			
Relationship to Project:			
Mailing Address:			
City / State:		Zip Code:	
Email Address:			
Format of Notification:	<input type="checkbox"/> Posted Letter	<input type="checkbox"/> Email	<input type="checkbox"/> Other:
Addressee:			
Relationship to Project:			
Mailing Address:			
City / State:		Zip Code:	
Email Address:			
Format of Notification:	<input type="checkbox"/> Posted Letter	<input type="checkbox"/> Email	<input type="checkbox"/> Other:

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curbside
- Roadway
- Open Street

Notified Parties

Addressee:	
Relationship to Project:	
Mailing Address:	
City / State:	Zip Code:
Email Address:	
Format of Notification: <input type="checkbox"/> Posted Letter <input type="checkbox"/> Email <input type="checkbox"/> Other:	

Addressee:	
Relationship to Project:	
Mailing Address:	
City / State:	Zip Code:
Email Address:	
Format of Notification: <input type="checkbox"/> Posted Letter <input type="checkbox"/> Email <input type="checkbox"/> Other:	

Addressee:	
Relationship to Project:	
Mailing Address:	
City / State:	Zip Code:
Email Address:	
Format of Notification: <input type="checkbox"/> Posted Letter <input type="checkbox"/> Email <input type="checkbox"/> Other:	

Duplicate this form as needed.

APPLICANT SIGNATURE REQUIRED.		
Name:	Signature:	Date:

FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.									
City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:



Community Engagement

FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
Project Working Name and Site:	Permit No:

You are also strongly encouraged to conduct neighborhood outreach regarding your project. Consider and address the project’s potential impact on the surrounding neighborhood. Do meaningful outreach in advance to any neighbors, businesses, and community organizations affected by the event. The point of neighborhood outreach is to inform those who may be affected, listen to any concerns, identify any steps that can be taken to reduce potential impact, and work with the neighborhood toward mutually beneficial outcomes. The following are examples of documentation of community engagement. Attach copies of any of the following to this form.

- Letters of support from local neighborhood groups, merchant’s association, BID or CBD.
- Letters of support from local institutions, other adjacent organizations, residents, and business owners.
- Signed petitions.
- Documentation about community meeting(s) held to discuss the Project proposal.

Notified Parties

Addressee:			
Relationship to Project:			
Mailing Address:			
City / State:		Zip Code:	
Email Address:			
Format of Notification:	<input type="checkbox"/> Posted Letter	<input type="checkbox"/> Email	<input type="checkbox"/> Other:
Addressee:			
Relationship to Project:			
Mailing Address:			
City / State:		Zip Code:	
Email Address:			
Format of Notification:	<input type="checkbox"/> Posted Letter	<input type="checkbox"/> Email	<input type="checkbox"/> Other:
Addressee:			
Relationship to Project:			
Mailing Address:			
City / State:		Zip Code:	
Email Address:			
Format of Notification:	<input type="checkbox"/> Posted Letter	<input type="checkbox"/> Email	<input type="checkbox"/> Other:

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curbside
- Roadway
- Open Street



Maintenance Plan

FOR APPLICANT: Project Working Name and Site:	FOR GOVERNMENT USE ONLY: Permit No:
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Basic maintenance considerations are listed below. Detail additional maintenance tasks on the back of this form.

Responsible Entity	(Hrs / Cycle)	Labor \$ / FY	Items	\$ Total
--------------------	---------------	---------------	-------	----------

GENERAL CLEANLINESS AND TIDINESS

Remove Litter, sweep ground surfaces & clear gutters. DAILY

--	--	--	--	--

Clean and empty any trash receptacles. DAILY

--	--	--	--	--

Clean movable and non-movable furniture & equipment. DAILY

--	--	--	--	--

Deploy/store movable furniture & equipment. DAILY

--	--	--	--	--

Abate graffiti. AS NEEDED

--	--	--	--	--

Power wash ground surfaces. WEEKLY OR AS NEEDED

--	--	--	--	--

PLANTINGS (IF APPLICABLE)

Irrigate plants and trees. WEEKLY OR AS NEEDED

--	--	--	--	--

Inspect for degradation of/erosion of planting areas and mulch. Restore areas as needed. WEEKLY

--	--	--	--	--

Inspect plants and trees for damage and health. WEEKLY Replace damaged / unhealthy plantings. AS NEEDED

--	--	--	--	--

INFRASTRUCTURE AND STRUCTURES

Inspect all movable furniture and equipment for damage and integrity. Repair or replace as needed. WEEKLY

--	--	--	--	--

Inspect all movable and non-movable structures for damage and integrity. Repair and replaces as needed. WEEKLY

--	--	--	--	--

Inspect street and sidewalk surfaces for degradation & damage. Report as to SF311 needed. WEEKLY

--	--	--	--	--

Required for the following projects:

Private Lot

Public Lot

Sidewalk

Curbside

Roadway

Open Street

Licensed Pet Control Company: **Phone Number:**

Frequency of Service: **(e.g. every 2 weeks, monthly)**

Additional Maintenance Special tasks specific to the site or project

APPLICANT SIGNATURE REQUIRED.

<i>Name:</i>	<i>Signature:</i>	<i>Date:</i>
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FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.

City Planning		Public Works		Public Health		Entertainment Commission		Division of Real Estate	
<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>



Context Plan

FOR APPLICANT:

Project Working Name and Site:

FOR GOVERNMENT USE ONLY:

Permit No:

Submit a plan extending three blocks' radius around the proposed site. This can be a google maps screenshot with annotations over it. Please submit as 11" x 17" pdf file, with the following naming convention: *ProjectName_ContextPlan_YYYYMMDD.pdf*. On the plan, note:

- Existing open spaces, parks, and vacant lots and surface parking lots.
- Note the location of any hospital, school, places of worship, courthouse, mortuary, public library, or City Hall.
- Indicate the extents of the proposed closure
- Make sure your plan is clearly labeled with a date.
- For each street segment within the extents of the plan, use arrows to depict the number and direction of traffic lanes.

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curbside
- Roadway
- Open Street



APPLICANT SIGNATURE REQUIRED.

Name:	Signature:	Date:
-------	------------	-------

No forms here :-)
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FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.									
City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:



Site Plan(s)

FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
<i>Project Working Name and Site:</i>	<i>Permit No:</i>

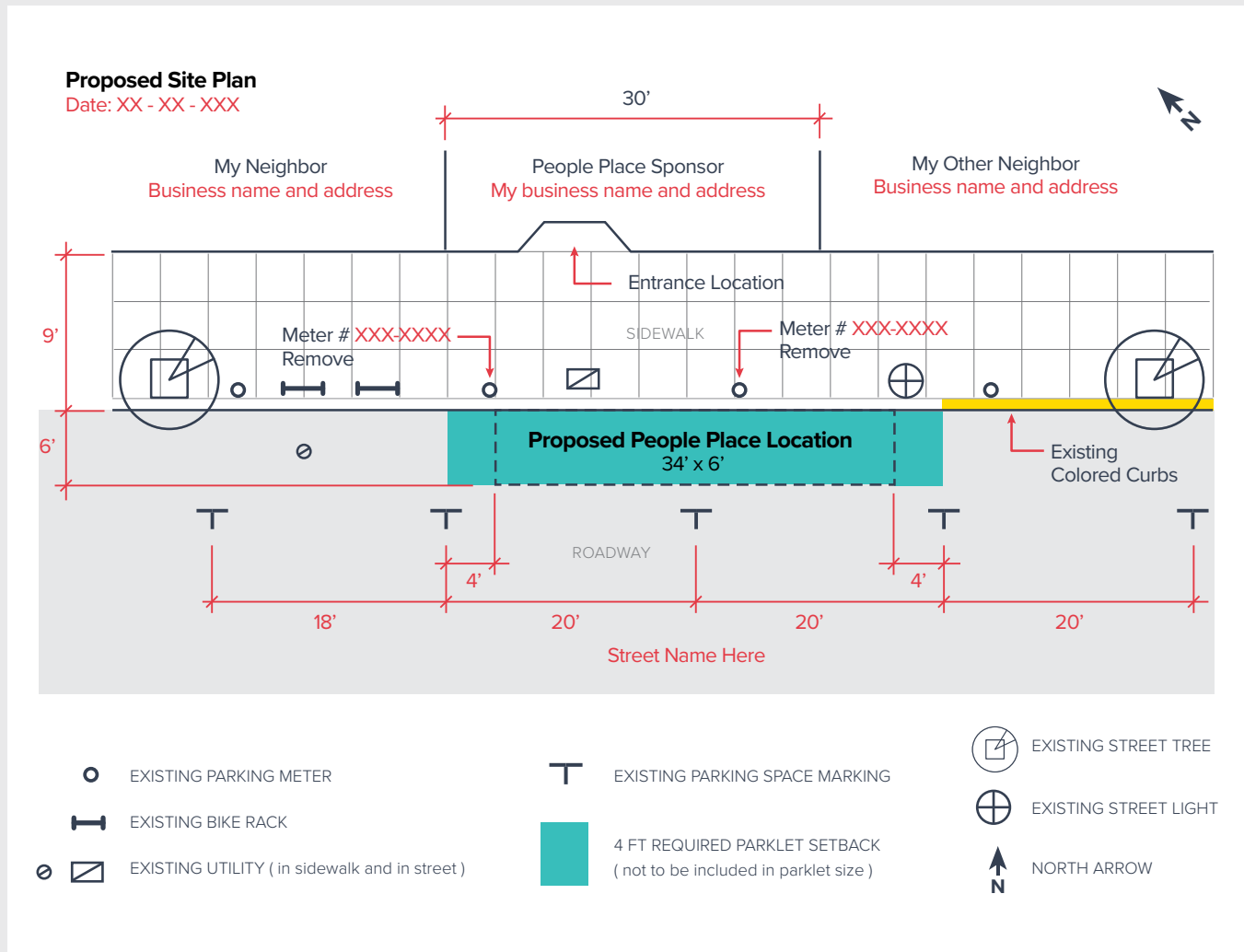
An initial site plan showing the existing street and sidewalk environment is required with all applications. The site plan should show the footprint of the proposed project and all street and sidewalk elements at least 20 feet on either side of the proposed project. Site plans must be drawn to scale (by hand or computer). Make sure your plan is clearly labeled with a date. Please submit as 11”x 17” pdf file, with the following naming convention: *ProjectName_ContextPlan_YYYYMMDD.pdf*.

- | | |
|--|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> Your building, adjacent properties (include addresses) and their building entrances. <input type="checkbox"/> Existing sidewalk width(s). <input type="checkbox"/> Existing curb cuts and driveways. <input type="checkbox"/> Adjacent bicycle lane or auto traffic lane. <input type="checkbox"/> Existing parking spaces with dimensions. <input type="checkbox"/> Existing parking meters, with numbers of all meters to be removed (these numbers are generally posted on the meter facing the street, and are formatted as follows: XXX-XXXXX). <input type="checkbox"/> Other existing sidewalk features near the proposed project area (fire hydrants, streetlights, utility access panels, bicycle racks, etc). <input type="checkbox"/> Existing utilities in the street and on the sidewalk. | <ul style="list-style-type: none"> <input type="checkbox"/> All colored curb zones (red, yellow, green, white, blue). <input type="checkbox"/> Existing street trees and tree pits. <input type="checkbox"/> Proposed project footprint and dimensions. <input type="checkbox"/> Project setback dimensions (4 feet from adjacent parking spaces and 1 foot from adjacent bicycle lane or auto traffic lane). <input type="checkbox"/> Standpipes and fire escapes on building facades. <input type="checkbox"/> Building entrances such as doorways and garages. <input type="checkbox"/> Date of drawing. |
|--|--|

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curbside
- Roadway
- Open Street

Sample Site Plan Drawing



FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.

City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:



Color Curb Application Form

FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
Project Working Name and Site:	Permit No:

To begin processing, please fill out this application form completely, sign, date and submit it to
 1 South Van Ness Avenue, 7th Floor San Francisco, CA 94103-5417
 Please include the **non-refundable** processing fee for all white, green and driveway red zone requests.
 Please make the check payable to *SFMTA Color Curb Program*, and do not include the paint fee;
 you will be invoiced for the paint fee when and if the zone is approved.
 For general questions regarding the Color Curb Program or regarding the required processing fees,
 visit www.sfmta.com and type in "new color curb" in the search box.

SECTION 1: APPLICANT INFORMATION

Name of Applicant:	Title:
Business Name (if applicable):	Phone:
Address of Requested Zone:	Email:
Billing Address (if different from above):	Fax:
San Francisco, CA 941	Prefer to be contacted via:

SECTION 2: ZONE REQUEST INFORMATION

- Type of Zone, check all that apply: Yellow Blue White* Green*
 Driveway Red Zone (skip to Section 4)*.
 * - application and installation fees required
- Location of the Zone: Within your frontage? Yes/ No, explain: _____
 Front Side Rear of Building

SECTION 3: ADDITIONAL INFORMATION ONLY FOR YELLOW, GREEN WHITE OR BLUE ZONES

- Length of Zone Requested (or number of parking spaces): _____
- Type of Business (check one): Wholesale/Warehouse Hotel Residential Restaurant
 Retail Medical Office Office Other: _____
- Size of Business (provide as applicable): Number of: _____ sq. ft. _____ seats _____ rooms/units
- Business Hours and Days: _____
- FOR **YELLOW** ZONES:
 - Number of pick-ups/deliveries daily: _____ Number of trucks simultaneously: _____
 - Typical size and type of truck _____
 - Estimated times of highest usage _____
- FOR **WHITE OR GREEN** ZONES:
 - Estimated Number of customers/visitors daily _____
 - Estimated times of highest usage _____
- FOR **BLUE** ZONES:
 - Estimated Number of disabled persons visiting premises daily _____
 - Estimated times of highest usage _____

SECTION 4: PURPOSE AND SIGNATURE

Please describe the purpose and intended use of this zone: _____

Signature: _____ Date: _____ Payment submitted on: _____

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curbside
- Roadway
- Open Street



COLOR CURB CHANGES

If your project proposal involves shortening, eliminating and/or relocating a color curb zone on your block, then you must submit additional documentation. This will help the City understand potential impacts of your proposal. Submit this additional documentation as part of your design drawing set.

If the changes to color curb zones are acceptable, SFMTA will hold a Public Hearing to legislate the changes before your project is installed. It's important that you conduct thorough outreach to all neighboring businesses and residents regarding the proposed changes.

What do I submit?

1. A **plan or diagram** (see list below) of your block, prepared as one of the sheets in the design drawing set for the Project.
1. **“Color Curb Use Form” (Form O)** from every business on your block.
2. If you are shortening a zone that currently fronts your business: A **“Color Curb Use Form” (Form O)** from you as the Project Sponsor.
3. If you are proposing to relocate a zone that currently fronts your business: An SFMTA **“Color Curb Application Form” (Form N)** from the business in front of the new proposed zone.

What should my plan show?

Using the drawing from SFMTA as a base, develop a plan that includes the following elements:

- Locations of all the existing color curb zones
- Locations of any proposed shortenings or relocations of color curb zones
- Location of the proposed project
- Locations of all businesses, names, and addresses
- Locations of all onstreet parking spaces and bus zones

What does a public hearing involve?

SFMTA holds a hearing once a month to consider proposals for color curb zone changes.

10 days before the hearing date, posters are placed in the vicinity of the proposed zone.

Any interested parties may attend the hearing to express support or concern for the proposed color curb changes. Interested parties may also submit their comments in writing at the hearing or by email.

The hearing officer will make a final decision.

The **“Color Curb Application Form”** and other information is available at:

<https://www.sfmta.com/services/streets-sidewalks/installation-requests/new-color-curb>

FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.									
City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:



Color Curb Use Form

FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
Project Working Name and Site:	Permit No:

Business Information

Business Name: _____

Business Address: _____

Zip Code: _____ Cross Street(s): _____

Contact Name 1: _____ Contact Name 2: _____

Title: _____ Title: _____

Phone: _____ Phone: _____

Email: _____ Email: _____

Type of Business: (Check one)

<input type="checkbox"/> Wholesale / Warehouse	<input type="checkbox"/> Hotel / Apartment	<input type="checkbox"/> Restaurant / Cafe
<input type="checkbox"/> Retail / Store	<input type="checkbox"/> Medical Office	<input type="checkbox"/> Office
<input type="checkbox"/> Other: _____		

Size of Business: Number of: _____ Sq Ft. _____ Seats: _____ Rooms/Units: _____

Business Hours:

Sunday	Open: _____	Close: _____
Monday	Open: _____	Close: _____
Tuesday	Open: _____	Close: _____
Wednesday	Open: _____	Close: _____
Thursday	Open: _____	Close: _____
Friday	Open: _____	Close: _____
Saturday	Open: _____	Close: _____

Color Curb Information

Number of pick-ups/deliveries daily: _____

For **Yellow Zones**: Typical size and type of truck: _____

Estimated times of highest usage: _____

Estimated Number of customers/visitors daily: _____

For **White** or **Green Zones**: Estimated times of highest usage: _____

Sign Here Signature of applicant:	Date:
--	-------

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curbside
- Roadway
- Open Street

COLOR CURB CHANGES

If your project proposal involves shortening, eliminating and/or relocating a color curb zone on your block, then you must submit additional documentation. This will help the City understand potential impacts of your proposal. Submit this additional documentation as part of your design drawing set.

If the changes to color curb zones are acceptable, SFMTA will hold a Public Hearing to legislate the changes before your project is installed. It's important that you conduct thorough outreach to all neighboring businesses and residents regarding the proposed changes.

What do I submit?

1. A **plan or diagram** (see list below) of your block, prepared as one of the sheets in the design drawing set for the Project.
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2. If you are shortening a zone that currently fronts your business: A **“Color Curb Use Form” (Form O)** from you as the Project Sponsor.
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What should my plan show?

Using the drawing from SFMTA as a base, develop a plan that includes the following elements:

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10 days before the hearing date, posters are placed in the vicinity of the proposed zone.

Any interested parties may attend the hearing to express support or concern for the proposed color curb changes. Interested parties may also submit their comments in writing at the hearing or by email.

The hearing officer will make a final decision.

The **“Color Curb Application Form”** and other information is available at:

<https://www.sfmta.com/services/streets-sidewalks/installation-requests/new-color-curb>

FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.									
City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:



Temporary Occupancy Permit

FOR APPLICANT:

Project Working Name and Site:

FOR GOVERNMENT USE ONLY:

Permit No:

BSM PERMIT # _____



London N. Breed
Mayor

Mohammed Nuru
Director

Jerry Sanguinetti
Manager

Street Use and Mapping
1155 Market St., 3rd floor
San Francisco, CA 94103
tel 415-554-5810

sfpublicworks.org
facebook.com/sfpublicworks
twitter.com/sfpublicworks

PROJECT INFORMATION

Site Address: _____

Name of Event: _____

Start Date: _____ Completion Date: _____

Days of Operation: __M __T __W __Th __F __S __Su

Hours: _____AM _____PM to _____AM _____PM

Street(s): _____ LF: _____

Street(s): _____ LF: _____

Street(s): _____ LF: _____

SKETCH LOCATION

List all elements of occupancy: (structural, equipment, materials, storage boxes, etc.):

APPLICANT/AUTHORIZED AGENT INFORMATION

Company Name: _____

Applicant Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

SF Business Certificate: _____ License #: _____

ATTACHMENTS:

- Endorsed Certificate of Insurance naming the City and County of San Francisco, Bureau of Street Use & Mapping, as additional insured with the Bureau's address as the certificate holder
- Street Closure Required (Department of Parking and Traffic permit – Traffic Engineering (415) 701-4500)
- Food/Cooking (Department of Public Health Permit and SF Fire Department Permit)
- Performing Arts (SF Entertainment Commission – Loud Speaker Permit for Amplification)
- Night Noise
- Mobile Food – Single Day Event
- Other _____

The permittee hereby agrees to comply with all requirements noted on the reverse side of this application.

Signature of Applicant/Authorized Agent Date

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curb-side
- Roadway
- Open Street



INSTRUCTIONS FOR OBTAINING A REVOCABLE TEMPORARY OCCUPANCY PERMIT

- Complete the application on reverse side.
- Allow a minimum **3 days** in advance for approval and activation and tow-away registration. Late applications will not be accepted. (To activate : 415-554-5824)
- Submit a detailed space layout plan showing path of travel
4-foot minimum in residential
6-foot minimum in commercial area.
- Submit a non-refundable fee per day per block face. The fee may vary at the discretion of San Francisco Public Works. (See Fee Schedule). Make checks payable to the San Francisco Public Works. We also accept cash and credit card payments (VISA, MasterCard and American Express).
- Submit a Certificate of Insurance for general liability coverage of not less than \$2 million, endorsing the Bureau of Street Use & Mapping as additional insured with the Bureau’s address as the certificate holder. (<http://www.sfdpw.org/Modules/ShowDocument.aspx?documentid=62>)
- For any ISCOTT approved (special event) street closure permits, a copy will be needed at the time of issuance (**See MTA <http://www.sfmta.com>**).
- For Special Traffic Permits, please provide additional time for SFMTA approval (**See MTA <http://www.sfmta.com>**).
- All submitted plans, applications, and attachments shall comply with all rules, regulations and guidelines set forth by *DPW Order No. 165,716*
- If occupying the right-of-way at night, a Night Noise permit is required in conjunction with other DPW permits. (See Night Noise requirements)

- Single Day Event Mobile Food (More details at : <http://www.sfpbpublicworks.org/mobilefood>)

Submit all of the above with this application to:

San Francisco Public Works
Bureau of Street-Use and Mapping
1155 Market Street, 3rd Floor
San Francisco, CA 94103
BSMPermitDivision@sfdpw.org
Processing Hours : 7:30am - 4:00pm

TOW-AWAY AND NO STOPPING SIGNS CAN BE PURCHASED FROM SF PUBLIC WORKS OR PRINTED PER SPECIFICATIONS NOTED AT WWW.SFDPW.ORG/PERMITS

1. Tow-Away Signs are **installed by the permittee**:

- Place signs in such a manner that the maximum spacing between signs is no more than 20 feet.
- Signs may be attached to parking meter posts or place signs flat on wood or aluminum or other approved material, and attach them directly on solid barrier fences, and/or
- Mount the signs securely to existing poles, posts, type II barricades as per Cal Trans specifications, or on construction fences.

2. The permittee shall post signs 72 hours in advance of the occupancy authorized in the permit and remove such signs upon termination of the permit. A permittee must maintain signs during the entire term of occupancy and during the hours specified in the permit. If any information required on a sign must be modified, the permittee shall install new signs rather than change the information on the existing sign. If signs are removed, modified, or altered in any way, it shall be the permittee’s responsibility to install new signs containing the required information.

FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.

City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:



Final Design Drawings

FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
Project Working Name and Site:	Permit No:

1. Project Location and Context Plan. This drawing shows the proposed project footprint in relation to the surrounding streetscape context. Label each sheet with a date. See form L - Context Plan - for specific instructions.

2. Accessibility Plan: The drawing extents should include the entire length of the project site including the clear buffer areas at both ends; and the fronting sidewalk and building facades:

- Spot elevations on the sidewalk and street.
- Path of Travel onto project, connecting the
- Wheelchair turnaround space and
- Wheelchair resting area.

3. Detail Site Plan. The drawing extents should include the entire length of the project site including the clear buffer areas at both ends; and the fronting sidewalk and building facades. See Form M - Site Plan(s) - for specific instructions.

4. Elevations from all sides. These side-view drawings of your proposed design should include:

- Various elements included in the design.
- Different materials to be used in the design.
- Dimensions of project, project elements and buffer areas.

5. Sections. These are “cut-through” drawings of your project design that articulate complex design elements; such as how accessibility is provided.

6. Construction Details. These drawings show how your project will be assembled or constructed. They should include:

- A detail of the curb / gutter / project threshold.
- A detail showing how you will maintain positive drainage flow along the curb line. You should also articulate how you will access the drainage channel if it gets blocked.

7. Renderings and Perspectives (optional).

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curbside
- Roadway
- Open Street

Please submit as 11”x 17” pdf file, with the following naming convention: *ProjectName_ContextPlan_YYYYMMDD.pdf*

No forms here :-)
 This page was intentionally left blank.

APPLICANT SIGNATURE REQUIRED.		
<i>Name:</i>	<i>Signature:</i>	<i>Date:</i>

FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.									
City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>



Performance Bond

FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
Project Working Name and Site:	Permit No:

Bond No.: _____

Premium: _____ Per Annum

KNOW ALL MEN BY THESE PRESENTS:

That _____ (Hereinafter called the "Principal"), as Principal, and _____, of the City of _____ a corporation duly organized under the laws of the State of _____, (hereinafter called the "Surety"), as Surety, are held and firmly bound unto the CITY AND COUNTY OF SAN FRANCISCO, CALIFORNIA (hereinafter called the "Obligee") in the sum of _____ (_____), for the payment of which sum well and truly to be made, said Principal and said Surety, bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

Sealed with our seals and dated this _____ day of _____ A.D. 20.

WHEREAS, it is the intention of the above-named Principal to construct improvements on (Assessor's Block _____ and Lot _____), fronting on _____ in accordance with Building Permit Application No(s). _____.

WHEREAS, upon written application, said Principal, by Department of Public Works Order/Permit No. _____, was granted permission to excavate and perform street and/or sidewalk work adjacent to the above mentioned property subject to the provisions in said Order/Permit No. _____.

NOW, THEREFORE, the condition of the above obligation is such that if said Principal complies with the provisions of Department of Public Works Order/Permit No. _____, this obligation shall be null and void; however, it shall remain in full force and effect during the time of construction pursuant to Article 9 of the Public Works Code.

_____ COMPANY

By: _____
(Principal)

_____ INSURANCE COMPANY

Attorney-in-Fact

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curbside
- Roadway
- Open Street

PERFORMANCE BOND INFORMATION

Why do I need a performance surety bond?

Your proposed project is located on a segment of public right-of-way which will be impacted by infrastructure work, which may require your built project to be removed to facilitate excavation and other work within the public right-of-way. Public Works staff will specify what type(s) of work are planned for your street segment.

What kind of infrastructure work are you referring to?

Infrastructure work includes repair and/or replacement of water mains and laterals, gas lines, electrical and telecommunications lines, and/or other utilities. Infrastructure work may also include street repaving, sidewalk repair, replacement, widening of sidewalks and/or other streetscape projects. Often, multiple infrastructure projects are executed together in a sequence; for example the replacement of underground utility lines followed directly by street repaving.

When will the infrastructure work take place?

Infrastructure work on your segment of right-of-way will occur sometime during a contract work period, which is typically six to twenty-four months. Interagency staff will communicate specific dates within 90 days to alert you about upcoming work on your street segment. You will have those 90 days to arrange for removal and storage of your project. You may re-install your project after infrastructure work has been completed.

When do I provide proof a Performance Bond?

You must provide proof of a Performance Bond at or before submitting your Final Project Proposal and Permit Application Package to the City. The City will not issue your Project Permit until the Performance Bond has been submitted.

When will the bond be released?

The Bond will be released only after your Project is permanently removed and your Project Permit expired or revoked.

Who do I issue the bond to?

The Bond is issued to the **City and County of San Francisco California**. Use the form “Performance Bond” on the previous page.

How much is the performance bond?

You must take out a bond for at least **\$10,000** (ten thousand dollars).



Proof of Public Posting

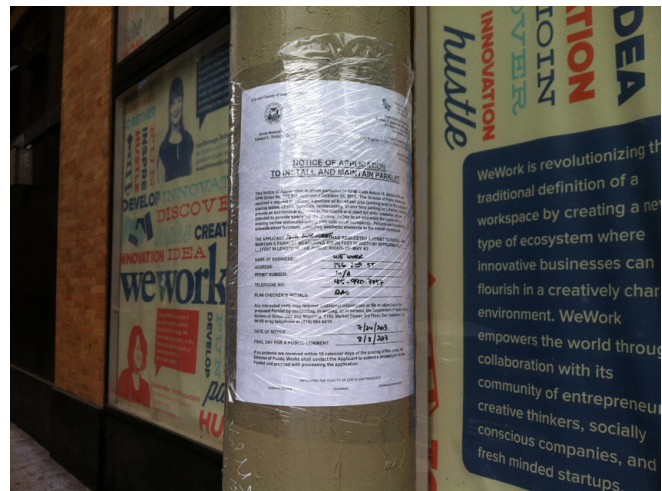
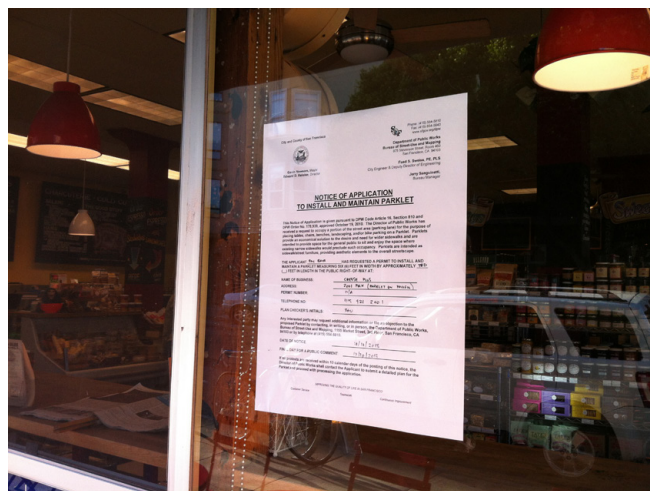
FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
Project Working Name and Site:	Permit No:

Upon submission of the People Place Permit application, the prospective Steward shall post the site(s) with one or more Notices of Application provided by Public Works for a period of 10 calendar days. The Notice(s) shall be posted in a location(s) acceptable to Public Works. The prospective Steward shall remove the Notice of Application the day after expiration of the 10-day notice period.

For projects also seeking a Limited Live Performance permit, the Entertainment Commission requires that a notice be posted for 30 days to advise the general public of the application. The prospective Steward shall remove the Notice of Application the day after expiration of the 30-day notice period.

The prospective Steward shall submit photographic evidence that the Notice(s) were posted appropriately. See below for examples of acceptable photographs.

Required for the following projects:



- Private Lot
- Public Lot
- Sidewalk
- Curbside
- Roadway
- Open Street

Please provide photographic proof of public posting. Examples above show acceptable locations where Notices can be posted.

**No forms here :-)
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Proof of Insurance

FOR APPLICANT: Project Working Name and Site:	FOR GOVERNMENT USE ONLY: Permit No:
---	---

Proof of Insurance. All project sponsors need to have the City and County of San Francisco added as an “Additionally Insured” with a minimum liability coverage of \$1,000,000. Most insurance companies will do this for little or no extra charge.

ACORD.	CERTIFICATE OF INSURANCE	ISSUE DATE:				
PRODUCER:		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER OTHER COVERAGE AFFORDED BY THE POLICIES BELOW.				
COMPANIES AFFORDING COVERAGE						
COMPANY LETTER A						
COMPANY LETTER B						
INSURED:		COMPANY LETTER C				
		COMPANY LETTER D				
COVERAGES AND LIMITS						
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.						
CO. LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFF. DATE	POLICY EXP. DATE	DESCRIPTION	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMM. GENERAL LIAB. <input checked="" type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCURRENCE <input type="checkbox"/> OWNER'S & CONTRACT'S PROT <input type="checkbox"/> _____				GENERAL AGGREGATE PROD-COMP/OP AGG. PERS & ADV. INJURY EACH OCCURRENCE FIRE DAMAGE (One Fire) MEDICAL EXPENSE (One Pay)	\$2,000,000 \$1,000,000 \$1,000,000 \$ 100,000 \$ 5,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY				COMBINED SINGLE LIMIT BODILY INJURY (Per Person) BODILY INJURY (Per Accident) PROPERTY DAMAGE	\$ \$ \$ \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE AGGREGATE	\$ \$
	WORKERS' COMPENSATION AND EMPLOYER'S LIABILITY THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL. <input type="checkbox"/> EXCL.				<input type="checkbox"/> STATUTORY LIMITS EACH ACCIDENT DISEASE - POLICY LIMIT DISEASE - EACH EMPLOYEE	\$ \$ \$
	OTHER INSURANCE					
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS: Above policies have been endorsed to name as additional insured: City and County of San Francisco, Its Officers, Employees and Agents.						
NAME AND ADDRESS OF CERTIFICATE HOLDER: Bureau of Street-Use & Mapping 1155 Market Street, 3 rd Floor San Francisco, CA 94103-0942				CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT.		
ACORD 25-6 (3/93)				AUTHORIZED REPRESENTATIVE: ©ACORD CORPORATION 1993		

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curb-side
- Roadway
- Open Street

APPLICANT SIGNATURE REQUIRED.		
Name:	Signature:	Date:

No forms here :-)
 This page was intentionally left blank.

FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.									
City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:	Date:	Initial:



Host Agreement Form

FOR APPLICANT:	FOR GOVERNMENT USE ONLY:
<i>Project Working Name and Site:</i>	<i>Permit No.:</i>

People Places Are Public. I agree to keep my People Place free and open to all members of the public, regardless of whether or not they patronize my business. I will not provide table service at my project, nor will I place condiments or napkins on the project tables. My customers will pick-up their food and beverages inside at the counter. I will bus tables in the project to ensure it remains clean and well maintained.

I agree to keep my People Place well maintained and in good repair under the conditions of approval of my DPW permit. I will keep the People Place free of debris, grime, and graffiti, and to keep all plants in good health.

I agree to sweep the area surrounding the People Place and keep it litter-free. I agree to clear out the area beneath the project at least once a week.

Upkeep, Maintenance and Insurance. I agree to keep my People Place well maintained and in good repair under the conditions of approval of my permit. I will keep the People Place free of debris, grime, and graffiti, and to keep all plants in good health.

I agree to sweep the area surrounding the People Place and keep it litter-free. I agree to clear out the area beneath the project at least once a week.

Permit Renewals & Insurance. I understand that my insurance must be kept up to date. I understand my insurance must be up to date in order to renew my People Place permit.

I understand that People Place permit is renewable on an annual basis at the discretion of City staff.

Public Process. I understand that if for any reason, significant public concern is expressed about my People Place, the City may conduct a public hearing before a hearing officer. This may result in revocation of my existing People Place permit, or inability to renew my annual permit.

Reporting for Impact Studies and Other Analysis.

I understand that the City is interested in better understanding the social and economic impacts that People Places may have on our streets, merchants and commercial districts. I will be asked to report information that will assist the City with assessments and studies of the People Place Program.

Change of Ownership and Removals. I understand that if my business changes ownership, I will either need to remove my People Place or transfer the permit to the new owner. I understand that if for some reason I no longer want my People Place, I am responsible for removing it. I understand that voluntary removal requires an additional permit.

I understand that in some instances such as a streetscape repaving, the City may require me to remove the People Place. In these situations, I may need to store my People Place off-site. I may be able to re-install my People Place after the streetscape improvement has been completed.

I understand that because People Places may sit above underground utilities, there may be instances where I will need to remove my People Place with little notice in order to service those utilities. The City may remove, dismantle, or damage my People Place in order to service those utilities. I understand I am responsible for restoration and re-installation of the People Place in these cases.

I understand that if I hold a Limited Live Performance from the Entertainment Commission, any change of ownership of the business, or amendment of ownership, requires a new application from the SF Entertainment Commission. SF Entertainment Commission permits are non-transferable. Please contact the SF Entertainment Commission (<http://www.sfgov.org/entertainment>) for more information.”

I have read and fully understand the agreement on this form. By signing it, I accept the conditions stated in this agreement.

APPLICANT SIGNATURE REQUIRED.		
<i>Name:</i>	<i>Signature:</i>	<i>Date:</i>

Required for the following projects:

- Private Lot
- Public Lot
- Sidewalk
- Curb-side
- Roadway
- Open Street



No forms here :-)
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FOR OFFICE USE ONLY The pertinent Departments have reviewed and approved the content of this form.

City Planning		Public Works		SFMTA		Entertainment Commission		Division of Real Estate	
<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>	<i>Date:</i>	<i>Initial:</i>