

PLANNING DEPARTMENT

Voice - (760) 770-0340 Fax - (760) 202-1460

E-mail – <u>planning@cathedralcity.gov</u> 68-700 Avenida Lalo Guerrero - Cathedral City, CA 92234 (Staff Use Only) Case No.:

Related Case(s):

DANCE PERMIT

It is advisable to submit applications for review 60 days prior to commencement of the use or event to ensure adequate review of the application. If you have any questions while completing this application, please ask a member of the Planning Department for assistance. In order for the City to process a Dance Permit Application, the application fee must be submitted with the completed application. Incomplete applications will not be accepted (or the process may be delayed). **(PLEASE PRINT OR TYPE)**

	CHECK TIPE(S) C	DANCE PERMIT	AND AGE OF	PATRONS.						
☐ Function of Business		18 and over								
☐ Special Event	0	21 and over	ATION							
GENERAL INFORMATION:										
Business Name (if applicable):										
Site Address (proposed dance(s) to be held):										
	Date(s) of Dance(s):									
Time(s) of Dance(s):										
Check Here: Alcohol will be served. ABC License obtained (provide copy)										
 □ Alcohol will be served. □ ABC License obtained (provide copy) □ Request for Special Police Officer to be present at dance(s) pursuant to Sections 5.12.270-5.12.290 										
SUBMITTAL REQUIREMENTS:										
1. Floor Plan – Include size of dance floor, stage and bar, number of tables and/or booths 2. Site Plan – Include surrounding buildings and parking 3. Copy of ABC License or proof of approval by ABC (if applicable) 4. Signed documentation from the property owner agreeing to the use, as specified in this application. 5. Live Scan fingerprinting. Please refer to Live Scan instructions on Page 2. 6. Fee of \$1,236.00 7. Copy of City Business License										
DESCRIPTION (Include whether D.J. or live music, hours of operation):										
DESC	SRIPTION (Include	wnetner D.J. or II	ve music, nou	irs of operation):						
	220									
A DDI IOANIT/	PRC	JECT REPRESEN	TATIVE(S):							
APPLICANT/ REPRESENTATIVE N	lame:									
Address:	iame.	Telep	hone No.:							
City:		State		Zip Code:						
Contact Person:		E-ma	l Address:	<u> </u>						
I certify under penalty of perjury that all the application information is true and correct:										
Applicant's Signature: Date:										
PROPRERTY OWNER AGENT Name:	R/	Telen	hone No.:	Fax No.:						
Address:			E-mail Address:							
City:		State		Zip Code:						
		Otato								
Property Owner's Signature: Date:										
Date/Time Received:	Received	Bv: Ar	nount Received:	Receipt No(s):						

	DETERMINATIO	N OF A DDL	CATION (Staff I	les Order):		
ACTION TAKEN:	DETERMINATIO APPROVED	DENIED	·	ise Only):		
If denied, provide reasons): :					
Conditions of Approval:						
APPROVED BY:				DATE:		
	LIV	E SCAN INS	TRUCTIONS			
fingerprinted before painless and involve Department of Justic	ete your application, this is the process of s no ink. Your fingerp e (DOJ) via a secured no etained at the following eriff Department	for required orints are sca etwork. This p	background inves nned into a comp	tigations. The Li outer and then s	ive Scan process is sent directly to the	
UPS Store 67782 East Palm Can Cathedral City in the (760) 321-0703	yon (Hwy 111) Target Shopping Cente	er				
What is required: You will need a live scan form with a valid ORI and Mail Code Number (which is included i your application packet).						

Fee: Please contact the locations directly for Live Scan fee.