



**PLANNING DIVISION
CITY OF SAN JUAN CAPISTRANO**

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(949) 443-6331

planning@sanjuancapistrano.gov
www.sanjuancapistrano.gov/planning

FOR OFFICE USE ONLY

TUP #:

DATE RECEIVED:

RECEIVED BY:

PROJECT MANAGER:

TEMPORARY USE PERMIT (TUP) APPLICATION

TEMPORARY USE PERMIT applications are reviewed and approved administratively by the Community Development Department pursuant to Section 9-2.347 & 9-3.553 of the City of San Juan Capistrano Municipal Code. The purpose of the review is to allow for short-term activities which may be appropriate when regulated in a manner that will not impair the general public health, safety and welfare of the community. **Temporary Use Permits, once approved are valid for one year. The Development Services Director has the authority to extend the permit one time for up to an additional 12-months.**

I. APPLICANT

Name	
Street Address	
City, State, Zip Code	
Phone	
E-Mail Address	

II. PROPERTY OWNER OF RECORD

Property Owner	
Street Address	
City, State, Zip Code	
Phone	
E-Mail Address	

III. PROPERTY DESCRIPTION

Project Location		
Street Address		
Tract, Lot, Block	Assessor Parcel #	

IV. PROJECT DESCRIPTION

Temporary storage of building materials (restricted to those materials used during the construction of a permitted building project).

Temporary construction office/trailer (of the contractor provided such office is located on the construction site or on property adjoining the construction site).

Large construction in residential yards (boat construction, car restoration, etc.; shall not occur in any required front or side yard; shall be for the personal use of the applicant or family; shall comply with Section 9-3.615 noise standards; and shall be issued for a period not longer than one year, provided that extensions may be granted subject to the approval of the Director).

Other: _____

V. SUBMITTAL REQUIREMENTS

- **SITE PLAN** depicting location and limits of the temporary use.
- **FLOOR PLAN** and/or building elevation(s) for proposed temporary structures

VI. ACKNOWLEDGEMENT

I hereby acknowledge that this permit application will not be considered complete until I have submitted all required documentation and fees. I further certify that the information furnished above and in any attached exhibits is true and correct. The property owner further certifies that they are the legal owner of the property, consent to the filing of this application, and have authorized the applicant below to represent them with respect to the processing of this application. I hereby grant the City authority to enter onto the property to conduct site inspections.

PROPERTY OWNER SIGNATURE

APPLICANT SIGNATURE

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BUILDING DIVISION

RECOMMENDATION	APPROVE	DENY
CONDITIONS / COMMENTS		
BUILDING OFFICIAL SIGNATURE		
DATE		

ENGINEERING DIVISION

RECOMMENDATION	APPROVE	DENY
CONDITIONS / COMMENTS		
CITY ENGINEER SIGNATURE		
DATE		

PLANNING DIVISION

RECOMMENDATION	APPROVE	DENY
CONDITIONS / COMMENTS		
PLANNER SIGNATURE		
DATE		

ORANGE COUNTY FIRE AUTHORITY

RECOMMENDATION	APPROVE	DENY
CONDITIONS / COMMENTS		
OCFA SIGNATURE		
DATE		

SANTA MARGARITA WATER DISTRICT

RECOMMENDATION	APPROVE	DENY
CONDITIONS / COMMENTS		
SMWD SIGNATURE		
DATE		

FINAL ACTION

APPROVE

DENY

SUBJECT TO THE FOLLOWING CONDITIONS OF APPROVAL:	