



LAKE HAVASU CITY

Application for Temporary Extension of Outdoor Seating To Allow for Adequate Social Distancing

Submit completed application to the Development Services Department / Planning Division:
2330 McCulloch Blvd N. / Lake Havasu City, AZ 86403 or planninginfo@lhcaz.gov

APPLICATION NUMBER _____ DATE _____

(1) OWNER NAME/MAILING ADDRESS/CONTACT INFO

 _____ Phone: _____
 _____ Email: _____

(2) APPLICANT NAME/MAILING ADDRESS/CONTACT INFO (if different than Owner)

 _____ Phone: _____
 _____ Email: _____

(3) SITE LOCATION

Street Address: _____

Assessor Parcel ID: _____ TRACT _____ BLOCK _____ LOT _____

(4) PROPERTY INFORMATION

Description of Request: _____

Liquor Extension Yes No **If YES, State Extension of Premise application is required.**

(5) SUBMITTAL REQUIREMENTS: completed application must include the following attachments:

- a) Written permission from the property owner.
- b) One 8-1/2" x 11" Site Plan to include:
 - 1. Property dimensions.
 - 2. Existing building with dimensions.
 - 3. Existing building exit doors.
 - 4. Proposed outdoor patio area with dimensions and number of proposed seats.
 - 5. Any enclosures (fencing, walls, etc.)
 - 6. Proposed exits from outdoor patio area.
 - 7. Distance between outdoor patio exits.
 - 8. Widths of gates, if gates are proposed (3'-0" minimum).
 - 9. Provide panic hardware on gates, if latched gates are proposed.
 - 10. Gates shall swing in the direction of egress travel (swing out from outdoor patio area).
- c) Proof of Insurance (Certificate of Insurance).
- d) State Extension of Premise application (if applicable).

(6) APPLICATION PROCESSING TIMEFRAME & FEES

- a) Staff reviews submittal for completeness and compliance with the Lake Havasu City Code (3 business days).
- b) Staff processes review, which includes multiple City departments (10 business days).
- c) Staff mails original Notice of Action to owner and a copy to applicant (if different).

Permit Fee: Suspended per Resolution No. 20-3438 until the cessation of the Proclamation Declaring the Existence of a Local Emergency

(7) CONTACT PLANNING FOR FURTHER INFORMATION

Luke Morris, City Planner (928) 854-0722 morrisl@lhcaz.gov

Stuart Schmeling, Development Services Director (928) 854-0714 schmelings@lhcaz.gov

(8) CLARIFICATION

A person may request the City to clarify its interpretation or application of a statute, ordinance, code, or policy affecting the processing of this application in accordance with ARS § 9-839.

(9) CERTIFICATION/ACKNOWLEDGEMENT

- a) I hereby file the above request as an authorized applicant.
- b) To the best of my knowledge, the information provided herein is accurate and true.
- c) If any information is incorrect, I understand this permit can be revoked.
- d) I understand failure to comply with conditions placed on this permit or the creation of a public nuisance as defined by applicable state and local law may result in the immediate abatement of the offending activity or revocation of this permit.
- e) I am aware of the steps and timeframes involved in the processing of this application.
- f) Insurance Requirements: I agree to purchase and maintain General Liability Insurance with the following requirements: Minimum amount of \$1,000,000 for each occurrence/\$2,000,000 aggregate; coverage for bodily/personal injury, property damage, and broad form contractual liability; endorsed to include Lake Havasu City, Arizona, its departments, agencies, boards, commissions, officers, officials, agents, volunteers, employees, and contractors as named additional insureds with respect to liability arising out of or related to the occupancy, use, and activity in or about the lands described in this application. The City must be notified within 10 business days of policy suspension, cancellation, and reduction in coverage or limits. Insurance coverage must be provided by an insurance company admitted to do business in Arizona and rate A-VII or better.
- g) Indemnification: To the fullest extent permitted by law, the owner and applicant agree to indemnify, defend, save, and hold harmless Lake Havasu City, its departments, agencies, boards, commissions, officers, officials, agents, volunteers, and employees ("Indemnitee") for, from, and against any and all claims, actions, liabilities, damages, costs, losses, or expenses (including, but not limited to, court costs, attorneys' fees, and costs of claim processing, investigation and litigation) to which any Indemnitee may become subject, under any theory of liability ("Claims") arising out of or as a result of participation in the temporary extension of premises outlined in this application. Participant agrees to be responsible for primary loss investigation, defense, and judgement costs where this indemnification is applicable. This indemnification shall remain in effect so long as the described extension of premises exists.

To submit this application electronically, Lake Havasu City requires that you certify your application by submitting an electronic signature. Please type your name in the field below and click the confirm signature check box.

SIGNATURE _____

DATE _____

CONFIRM SIGNATURE



Arizona Department of Liquor Licenses and Control
 800 W Washington 5th Floor
 Phoenix, AZ 85007-2934
 www.azliquor.gov
 (602) 542-5141

DLLC USE ONLY

CSR:
Log #:

APPLICATION FOR EXTENSION OF PREMISES/PATIO PERMIT

OBTAIN APPROVAL FROM LOCAL GOVERNING BOARD BEFORE SUBMITTING TO THE DEPARTMENT OF LIQUOR
****Notice: Allow 30-45 days to process permanent change of premises****

- Permanent change of area of service. **A non-refundable \$50. Fee will apply.** Specific purpose for change:

- Temporary change (**No Fee**) for date(s) of: ___/___/___ through ___/___/___ list specific purpose for change:

1. Licensee's Name: _____ License#: _____
 Last First Middle

2. Mailing address: _____
 Street City State Zip Code

3. Business Name: _____

4. Business Address: _____
 Street City State Zip Code

5. Email Address: _____

6. Business Phone Number: _____ Contact Phone Number: _____

7. Is extension of premises/patio complete?
 If no, what is your estimated completion date? ___/___/___

8. Do you understand Arizona Liquor Laws and Regulations?
 Yes No

9. Does this extension bring your premises within 300 feet of a church or school?
 Yes No

10. Have you received approved Liquor Law Training?
 Yes No

11. What security precautions will be taken to prevent liquor violations in the extended area?

12. **IMPORTANT:** Attach the revised floor plan, clearly depicting your licensed premises along with the new extended area outlined in black marker or ink, **if the extended area is not outlined and marked "extension" we cannot accept the application.**

Barrier Exemption: an exception to the requirement of barriers surrounding a patio/outdoor serving area may be requested. Barrier exemptions are granted based on public safety, pedestrian traffic, and other factors unique to a licensed premises. List specific reasons for exemption:

Approval Disapproval by **DLLC**: _____ Date: ____/____/____

I, (Print Full Name) _____, hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Applicant Signature: _____

GOVERNING BOARD

After completion, and **BEFORE submitting to the Department of Liquor**, please take this application to your local Board of Supervisors, City Council or Designate for their recommendation. This recommendation is not binding on the Department of Liquor.

Approval Disapproval

Authorized Signature

Title

Agency

Date

DLLC USE ONLY

Investigation Recommendation: Approval Disapproval by: _____ Date: ____/____/____

Director Signature required for Disapprovals: _____ Date: ____/____/____