



9955 Live Oak Blvd., Live Oak, CA 95953  
(530) 695-2112 • Fax (530) 695-2595

## OUTDOOR HOLIDAY SALES ZONING CLEARANCE APPLICATION CHECKLIST

### OUTDOOR HOLIDAY SALES STANDARDS

Section 17.16.040 of the Zoning Code requires that a zoning clearance be obtained prior to opening an outdoor holiday sales site. In order to approve the proposal the following must be met:

**Operational period:** Temporary outdoor sales of Christmas trees during the Christmas season, pumpkins during the Halloween season and 4<sup>th</sup> of July fireworks sales are permitted for a 45 day period prior to the holiday and one week afterwards, subject to an approved zoning clearance, pursuant to Sec. 17.35.020. Due to the temporary nature of these uses, the development standards provided in this Title are not otherwise applicable, except for any health and safety issues that may arise.

### REQUIRED INFORMATION FOR THE APPLICATION

The following items are required in order to submit an application for a holiday sales zoning clearance:

- Completed and signed **Application Form** (form included).
- Written authorization** of the property owner, if the applicant is not the owner (suggested form is included in the packet if needed).
- Payment of **application fee** (fee schedule is included).
- 2 copies of the **site plan**, drawn to scale. List of items to be included on the site plan is provided below:
  - Project title and applicant's name.
  - North arrow.
  - Workable scale
  - Property lines, with dimensions.
  - All existing buildings, and other structures on the property, with distances to the nearest property line, parking, fencing, and landscaping.
  - All existing on-site or adjacent streets, alleys, easements and right-of-ways.
  - Proposed sales site.
  - Lot size, sales area, number of parking spaces provided.

**Within 5 days of submitting the application, staff will review the application to determine whether additional information is needed in order to find the application complete.**



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**OUTDOOR HOLIDAY SALES  
ZONING CLEARANCE APPLICATION FORM**

**APPLICANT INFORMATION**

Name \_\_\_\_\_ Address \_\_\_\_\_  
Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-mail \_\_\_\_\_

**PROPERTY OWNER INFORMATION (if different from the applicant)**

Name \_\_\_\_\_ Address \_\_\_\_\_  
Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-mail \_\_\_\_\_

**PROPERTY DESCRIPTION**

Assessor's Parcel No.(s) \_\_\_\_\_  
Address/General Location \_\_\_\_\_

**REQUEST (use additional sheet if needed)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**APPLICANT CERTIFICATION**

I hereby certify that this application and all other documents and maps submitted are true and correct to the best of my knowledge and belief. I agree to indemnify and hold harmless for all costs and expenses, including attorney's fees, incurred by City or held to be a liability of the City in connection with City's defense of its actions in any proceeding brought in any State or Federal court challenging the City's actions with respect to the Applicants' project.

Signature \_\_\_\_\_ Date \_\_\_\_\_

(If applicant is not the property owner a **written authorization** of the property owner is also required (suggested form is included in the packet if needed).

**CITY STAFF USE ONLY**

Total Fees: \$ \_\_\_\_\_ Zoning Clearance No. \_\_\_\_\_  
Receipt # \_\_\_\_\_  
Received by \_\_\_\_\_ Date \_\_\_\_\_  
Approved by \_\_\_\_\_ Date \_\_\_\_\_  
Staff comments: \_\_\_\_\_  
\_\_\_\_\_

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## AGENT AUTHORIZATION

### **Section A: Information of the Person(s) Renting or Leasing**

To the City of Live Oak:

\_\_\_\_\_  
Agent Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Mailing Address

is hereby authorized to process this application on my/our property, identified as Sutter County Assessor's Parcel Number(s) \_\_\_\_\_

This authorization allows representation for all applications, hearings, appeals, etc. and to sign all documents necessary for said processing, but not including documents(s) relating to record title interest.

### **Section B: Information of the Property Owner(s) (print and sign name):**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature