



Date Received	<u>09/26/11</u>
By	<u>DOLSEN</u>
Fee	<u>80.00</u>
Case #	<u>SPL-22-11</u>

## SPECIAL LICENSE PERMIT

### TEMPORARY SPECIAL EVENT

(Please Check All That Apply)

CARNIVAL     OUTDOOR FESTIVAL     CIRCUS   
FAIR     CONCERT     PARKING LOT SALE   
OTHER

(Please Type or Print Legibly)

APPLICANT Kirsten Cathell    PHONE 760) 228-5379  
ADDRESS 56311 Pima Trail    CITY Yucca Valley STATE CA ZIP 92284  
CONTACT PERSON/REPRESENTATIVE Diana D. Martino    PHONE 760) 660-5112  
ADDRESS \_\_\_\_\_    CITY \_\_\_\_\_    STATE \_\_\_\_\_    ZIP \_\_\_\_\_  
BUSINESS NAME (dba or Fictitious Name) \_\_\_\_\_    PHONE \_\_\_\_\_  
ADDRESS \_\_\_\_\_    CITY \_\_\_\_\_    STATE \_\_\_\_\_    ZIP \_\_\_\_\_  
PROPERTY OWNER Darin Sanden    PHONE 760) 365-1588  
ADDRESS 57840 29 Palms Hwy    CITY Yucca Valley STATE CA ZIP 92284  
OWNER'S SIGNATURE \_\_\_\_\_    DATE \_\_\_\_\_

#### EVENT INFORMATION

Ja JL    9/26/11  
DATE(S) OF EVENT October 8, 2011  
HOURS OF EVENT 11:00 am - 2:00 pm  
LOCATION OF EVENT 57840 Twentynine Palms Hwy, Yucca Valley  
ASSESSORS PARCEL NUMBER(S) \_\_\_\_\_  
DESCRIPTION OF EVENT Resource fair to let local families know what resources are available. Vendors will offer free activities geared toward children + families.

Town of Yucca Valley  
Community Development/Public Works Department  
58928 Business Center Dr  
Yucca Valley, CA 92284  
760 369-6575 Fax 760 228-0084

EXPECTED NUMBER OF PERSONS ATTENDING EACH DAY 200

WILL YOU BE SELLING / SERVING FOOD OR BEVERAGES? IF YES, WHAT TYPES?  
packages of crackers/snacks, bottled water  
for free

HOW ARE YOU PROPOSING TO SET UP / PREPARE FOR THE EVENT?  
Two rows of booths next to the highway.  
Vendors will be responsible for setting up thier own booth.

HOW ARE YOU PROPOSING TO CLEAN-UP THE SITE AND HANDLE TRASH DISPOSAL?  
Each vendor will be responsible for clean up + trash  
disposal off site. The County will ensure final clean-up is  
complete.

UNDER PENALTY OF PERJURY, I DECLARE THAT ALL INFORMATION ON THIS APPLICATION IS TO THE BEST OF MY KNOWLEDGE AND BELIEVE TRUE AND CORRECT STATEMENT OF FACT. I UNDERSTAND THAT IN ADDITION TO OBTAINING A PERMIT/ LICENSE, I MUST COMPLY WITH ALL OTHER CITY, COUNTY, STATE AND FEDERAL LAWS, REGULATIONS AND ORDINANCES.

NOTE: THIS APPLICATION DOES NOT CONSTITUTE A LICENSE. THE APPLICATION WILL BE REVIEWED AND DETERMINATION WILL BE BASED UPON PROVIDED INFORMATION. A RENEWAL APPLICATION MUST BE SUBMITTED ANNUALLY.

APPLICANT SIGNATURE *K. Moore* DATE 9/26/11