



**CITY OF EL MONTE
PERMIT COMMITTEE
AGENDA**

**Special Meeting
October 01, 2020
9:00 A.M.**

**COUNCIL CHAMBERS - CITY HALL EAST
11333 EAST VALLEY BOULEVARD**

PERMIT COMMITTEE

CHAIRMAN

Betty Donavanik

VICE CHAIRMAN

Jason Mikaelian

NEIGHBORHOOD SERVICES

Vacant

BUILDING DIVISION

Todd Morris

PLANNING DIVISION

Nancy Lee

POLICE DEPARTMENT

Cpt. Christopher Williams

FIRE DEPARTMENT

Justin Guerrero

LICENSE DIVISION

Anne Blakeley

CITY ATTORNEY

Richard Padilla

PERMIT COMMITTEE

SECRETARY

Ivonne Hernandez

NEXT MEETING DATES:

October	15, 2020	15 days
November	05, 2020	30 days
November	19, 2020	45 days
December	03, 2020	60 days

A. ROLL CALL:

B. FLAG SALUTE:

C. APPROVAL OF AGENDA

D. NEW APPLICATIONS

E. RENEWAL APPLICATIONS

F. CONTINUED APPLICATIONS

G. DENIAL/REVOCATION

H. OTHER

**I. AUDIENCE COMMENTS ON NON-
AGENDA ITEMS**

J. COMMITTEE COMMENTS

K. ADJOURN

Members of the public wishing to make public comment may do so via the following ways:

- (1) In person
- (2) Email-All interested parties can submit questions/comments in advance to the License/Treasury Dept. at license@elmonteca.gov If you are disabled and need special assistance to participate in this meeting, please contact the License/Treasury office T (626)580-2031 at least 48 hours in advance of the meeting so that we may make reasonable accommodations for your disability (28 code of Federal Regulations 35.102-35.104 ADA Title II).

C. APPROVAL OF AGENDA

Motion: _____
Second: _____
Action: _____

D. NEW APPLICATIONS

E. RENEWAL APPLICATIONS

Live Entertainment

1. DEMBA
dba: DEMBA FIESTA OF CARS
LASTING CLASSIC CAR SHOW
Main Street

Motion: _____
Second: _____
Action: _____

Date: October 17, 2020
Time: 9:00am-2:00pm

F. CONTINUED APPLICATIONS

G. DENIAL/REVOCATION

H. OTHER

I. AUDIENCE COMMENTS ON NON-AGENDA ITEMS (3 minutes).

J. COMMITTEE COMMENTS

092389

LIVE ENTERTAINMENT/PROMOTIONAL EVENT

Any person desiring to conduct a Live Entertainment/Promotional Event shall apply to the Permit Committee for a permit at least thirty (30) days in advance of the date of the proposed Live Entertainment/Promotional Event.

Definition:

Any activity planned, engaged in or permitted to occur for the purpose of or resulting in the pleasing, entertaining, attracting or retaining patrons or customers, and shall specifically include but not be limited to any pact, play burlesque show, revue, pantomime, fashion show, the playing of any musical instrument by any person, and the employment, use or display of nude or semi-nude persons, whether such person engaging in any such activity be owner, proprietor, employee, receptionist, food or bar service worker, dancer, model, customer, patron, amateur or professional performer, or whether hired, retained, displayed, used, permitted to be present, or permitted to participate or engage in any of the activities described in Section 5.12.070 by the owner, permittee, manager or employee of the premises.

Requirements:

1. Supplemental Business Permit Application Forms.
2. Live Entertainment Questionnaire.
3. A plot plan with the stamp of approval from the Planning Department.
4. A letter from the property owner giving applicant permission to use the location.

Permit Fees:

New \$260.00

License Taxes:

License Processing Fee \$25.00



CITY OF EL MONTE
Business License Application

11333 Valley Blvd.
 El Monte, CA 91731
 Phone: (626) 580-2031 FAX: (626) 443-2102
 license@elmonteca.gov

<small>DEPARTMENT USE ONLY</small>	
LICENSE #	092387
EXPIRATION DATE	10/17/2020
CO #	0

GENERAL INFORMATION

Business Name (DBA) <i>Downtown El Monte Business Assoc.</i>		Description of Business (Be specific)	
Corporate Name " "		<i>Live End:</i>	
Business Address <i>10933rd MAIN STREET</i>			
City <i>EL MONTE</i>	State <i>CA</i>		
Mailing Address (if different from Business Address) <i>P.O. Box 5834 EL MONTE, CA</i>		Area Code/Telephone	
Sole Proprietor <input type="checkbox"/>	Partnership <input type="checkbox"/>	Corporation <input type="checkbox"/>	L.L.P. <input type="checkbox"/> L.L.C. <input type="checkbox"/>
Business E-Mail		Fed Tax ID No.	State ID No.
Does your business have a California State License? Yes <input type="checkbox"/> No <input type="checkbox"/>		State License Number	Classification(s) Expiration Date
Owner 1 Name <i>NA</i>			
Home Address		Area Code/Telephone	
Driver's License No. <i>NA</i>	State	Expiration Date	Social Security No.
Owner 2 Name			
Home Address		Area Code/Telephone	
Driver's License No.	State	Expiration Date	Social Security No.

BUSINESS OPERATIONS INFORMATION

1. Will you be selling alcohol? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> ABC License # _____ ATTACH COPY	FOR CITY USE ONLY <i>\$ 289</i> SUBJECT TO AUDIT
2. Will you be selling tobacco? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Tobacco Retail # _____ ATTACH COPY	
3. Is business within Mall Boundaries? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
4. Home Occupation Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
5. Sales Tax (Seller's Permit) # _____ ATTACH COPY	
TAX SCHEDULE	
ENTER GROSS RECEIPTS \$ _____	
EL MONTE START DATE _____	

ACKNOWLEDGEMENT

Payment of this tax does not constitute zoning or building code approval. Check with the Planning Department in order to determine if your business can be legally established at your location. I declare, under penalty of perjury, that I am authorized to complete this application and, that to the best of my knowledge, the provided information and statements are true and correct.

<i>Pauline Cazares</i>	<i>7/21/20</i>	<i>PAULINE CAZARES, EVENT COOR.</i>
SIGNATURE (Typing your name here constitutes your digital signature)	DATE	PRINT NAME/TITLE
SIGNATURE (Typing your name here constitutes your digital signature)	DATE	PRINT NAME/TITLE

NEW OR RENEWAL OF BUSINESS TAX CERTIFICATE

On September 19, 2012 Governor Brown signed into law SB-1186 which adds a state fee of \$1 on any applicant for a local business license or similar instrument or permit, or renewal thereof. The purpose is to increase disability access and compliance with construction-related accessibility requirements and to develop educational resources for businesses in order to facilitate compliance with federal and state disability laws, as specified.

Under federal and state law, compliance with disability access laws is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies: The Division of the State Architect at www.dgs.ca.gov/dsa/Home.aspx
 The Department of Rehabilitation at www.rehab.cahwnet.gov
 The California Commission on Disability Access at www.cdda.ca.gov.



City of El Monte BUSINESS PERMIT

11333 Valley Blvd.
El Monte, CA 91731
(PHONE) (626) 580-2031 (FAX) (626) 443-2102
License@elmonteca.gov

DEPARTMENT USE ONLY	
ACCOUNT #	_____
EXPIRATION DATE	_____
DUE DATE	_____
PERMIT FEE	_____

BUSINESS NAME DEMBA		FOR OFFICE USE ONLY - VALIDATION		
CORPORATE NAME	BUSINESS TELEPHONE			
BUSINESS ADDRESS 10953 #0 Main St. El Monte, CA 91733				
MAILING ADDRESS SAME AS ABOVE		TYPE OF PERMIT <i>License</i>	TYPE OF OWNERSHIP	
OWNER #1	NA	SOCIAL SECURITY NO.	DRIVER'S LICENSE NO.	STATE
HOME ADDRESS		CITY	STATE	ZIP
HAVE YOU EVER BEEN CONVICTED OF AN OFFENSE (OTHER THAN TRAFFIC CITATIONS)?		<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES, IF "YES" PLEASE EXPLAIN:		
OWNER #2		SOCIAL SECURITY NO.	DRIVER'S LICENSE NO.	STATE
HOME ADDRESS	NA	CITY	STATE	ZIP
HAVE YOU EVER BEEN CONVICTED OF AN OFFENSE (OTHER THAN TRAFFIC CITATIONS)?		<input type="checkbox"/> NO <input type="checkbox"/> YES, IF "YES" PLEASE EXPLAIN:		
MOBILE VENDORS	VEHICLE LICENSE NUMBER(S):			
# VEHICLES:	1. _____	4. _____	7. _____	10. _____
	2. _____	5. _____	8. _____	11. _____
	3. _____	6. _____	9. _____	12. _____
ADDRESS WHERE VEHICLES PARKED:		CITY	STATE	ZIP

WE CANNOT PROCESS YOUR APPLICATION WITHOUT COMPLETE INFORMATION. PLEASE MAKE ANY ADDITIONS, CORRECTIONS OR CHANGES TO THE INFORMATION ABOVE AND RETURN THE SIGNED APPLICATION ALONG WITH YOUR PAYMENT TO THE ADDRESS LISTED ABOVE.

I HEREBY DECLARE UNDER PENALTY OF PERJURY THAT THE STATEMENTS MADE ABOVE ARE TRUE.

Pauline Lopez *Event Coord.* *7/21/20* *626-274-5551*
OWNER/OFFICER SIGNATURE TITLE DATE DAYTIME TELEPHONE NUMBER

FOR OFFICE USE ONLY

CITY OF EL MONTE
PERMIT COMMITTEE

LIVE ENTERTAINMENT QUESTIONNAIRE

BUSINESS NAME: DEMBA

Planning Department - (626) 580-2090

1. (A) Are you operating as a restaurant? (If "yes", please answer #1, if "no", please continue onto #2)
- _____ Yes No

If you are operating as a restaurant, do you have at least 20% of floor area in the kitchen and 50% of floor area in the dining area?

_____ Yes No

2. Signs

(A) Do all signs conform to the sign ordinance? (Any new sign(s) must be Approved prior to installation)

_____ Yes No

(B) Do you have portable signs, banners, or flags?

Yes _____ No

2. Did you provide a PLOT PLAN drawn to scale or premises showing all Buildings, parking, landscaping, etc.?

Yes _____ No

3. Did you provide a floor plan of building(s) drawn to scale showing Kitchen, dining and other areas?

_____ Yes No

4. Did you install a full height solid wall separating the dining area from bar/entertainment areas?

_____ Yes No

Discussed by: M. Vega MV
(Print Name) (Initials)

PERMIT COMMITTEE

SUPPLEMENTAL LIVE ENTERTAINMENT PERMIT APPLICATION

PLEASE TYPE OR PRINT CLEARLY, FILLING IN ALL SPACES, IF NOT APPLICABLE, MARK "N/A"

BUSINESS NAME: SEMBA

1. Provide a brief description of the type of Live Entertainment you are proposing to offer (be specific):

DJ Carl

2. Will this Live Entertainment include a display of nude or semi-nude persons as defined by section 5.12.080 EMMC?

Yes No

3. Check which categories of nude or semi-nude persons are applicable.

None <input checked="" type="checkbox"/>	Owners _____	Models _____
	Proprietors _____	Barmaids _____
	Waiters _____	Customers _____
	Waitresses _____	Dancers _____

Other: _____

4. State the maximum number of persons that will be nude at any one time 0
5. State the maximum number of persons that will be semi-nude at any one time 0

PLEASE RETURN WITH APPLICATION

PERMIT COMMITTEE
LIVE ENTERTAINMENT QUESTIONNAIRE
PAGE -2

FIRE DEPARTMENT - (626) 574-0949

1. (A) Are the proper fire extinguishers, rated 2A-10BC, provided for each 3000 sq. feet of building floor area, and Yes No
- (B) Are they within 75ft. of travel distance from anywhere on the premises? Yes No
2. Are electrical extension cords being used in place of permanent wiring? (No electrical extension cords are permitted) Yes No
3. (A) Are all exit doors easily opened from the inside, and Yes *NA* No
- (B) are they clearly marked as exits, and Yes *NA* No
- (C) are they accessible? Yes *NA* No
4. Is there an adequate number of exits for the occupant count permitted by the square footage size of the area that is to be used by the public? Yes No
5. Are all pressurized containers secured so as to prevent them from falling over when knocked against? (A small chain is recommended for securing pressurized containers) Yes No
5. If your business is also a restaurant, did you provide fire extinguisher Rated 40BC for the kitchen area? (Your cooking area must be protected by a fixed fire extinguishing system) Yes No

Discussed by: _____ Int: _____ Date: _____

PERMIT COMMITTEE
LIVE ENTERTAINMENT QUESTIONNAIRE
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BUILDING DEPARTMENT - (626) 580-2050

1. Did you submit a floor plan drawn to scale, showing the existing set-up as well as any proposed changes?
 Yes No
2. Did you provide a floor plan showing locations of all legal exits and exit signs?
 Yes No
3. Did you submit a floor plan which states that all existing bathrooms and exits comply with the present handicapped requirements?
 Yes No

Discussed by: BETTY DOMANAVIK Int: 300 Date: 9/29/20

POLICE DEPARTMENT - (626) 580-2105

1. Are the doors equipped with a self-closing device?
 Yes No
2. Do you agree to provide uniformed security guards as may be required?

Discussed by: WNA R 580
SUT Int: [Signature] Date: 9/22/2020
 Yes No

- NO POSTING ON PUBLIC PROPERTY
- NO BLOCKING OF SIDEWALKS
- MONITOR MUSIC/ EXCESSIVE NOISE
- NO ALCOHOL
- Comply w/ ABC LAWS

PERMIT COMMITTEE
LIVE ENTERTAINMENT QUESTIONNAIRE
PAGE - 4

CODE ENFORCEMENT - (626) 580-2080

1. Did you provide a plot plan to a Code Enforcement Officer?
Yes No
2. What type of Live Entertainment will you be having?
DJ Carl
3. Give the approximate number of people you expect to attend: 500
4. Will there be a cover charge to attend? Yes No
5. Number of days for this event: 1
6. What are the dates & the hours of the event for each day:
Saturday, Sept 13, 2020 from 9-3pm.
7. Will this event take place indoors or outdoors: outdoors
8. Provide written permission from property owner.

Discussed by: [Signature]
(Code Enforcement Officer)

Initials: [Signature]

Date: 9-22-20

PERMIT COMMITTEE
LIVE ENTERTAINMENT QUESTIONNAIRE
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LICENSE DEPARTMENT - (626) 580-2031

1. Did you read and understand the standard Live Entertainment conditions?
 Yes No
2. Did you complete the supplemental Live Entertainment application?
 Yes No
3. Did you provide the License Department with written clearances from each department?
 Yes No

Discussed by: Jon Salter Int: [Signature] Date: 09/29/2020

I hereby certify to the best of my knowledge and behalf that the information Provided above is true and correct.

Signature: [Signature]

Title: Tempa Coordinator

Date: 9/29/20

PERMIT COMMITTEE
LIVE ENTERTAINMENT QUESTIONNAIRE
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PUBLIC WORKS - (626) 580-2056

1. Will the event be held in the public right of way
(public owned streets, parking lot or sidewalk) Yes No
2. Did you provide the Public Works Dept. with a Plot Plan
(Copy Attached) Yes No
3. Approximate number of people do you expect to attend? 500
4. What are the dates & hours of the event for each day:

Saturday, Oct. 17, 2020
9-2pm

FOR OFFICE USE ONLY

Will applicant need an encroachment permit? Yes No

Insurance certificate provided? Yes No

Received By: Sahab Husby

Discussed By: _____ Initials: fm

Date: _____

- Fill out attached encroachment permit application and submit it to pwpermits@elmonteca.gov.

70 This **Spectrum Policy** consists of the Declarations, Coverage Forms, Common Policy Conditions and any
19 other Forms and Endorsements issued to be a part of the Policy. This insurance is provided by the stock
BK insurance company of The Hartford Insurance Group shown below.
SBM

INSURER: SENTINEL INSURANCE COMPANY, LIMITED
ONE HARTFORD PLAZA, HARTFORD, CT 06155
COMPANY CODE: A



Policy Number: 57 SBM BK1970 DX

SPECTRUM POLICY DECLARATIONS

Named Insured and Mailing Address: DOWNTOWN EL MONTE BUSINESS
(No., Street, Town, State, Zip Code) ASSOCIATION
10953 VALLEY MALL STE B
EL MONTE CA 91731

Policy Period: From 01/18/20 To 01/18/21 365 DAYS
12:01 a.m., Standard time at your mailing address shown above. **Exception:** 12 noon in New Hampshire.

Name of Agent/Broker: PROFESSIONAL INS ASSOC INC/PHS
Code: 141078

Previous Policy Number: 57 SBM BK1970

Named Insured is: ASSOCIATION

Audit Period: NON-AUDITABLE

Type of Property Coverage: NONE

Insurance Provided: In return for the payment of the premium and subject to all of the terms of this policy, we agree with you to provide insurance as stated in this policy.

TOTAL ANNUAL PREMIUM IS: \$509

Countersigned by *Suarez Castaneda*
Authorized Representative

10/30/19
Date

SPECTRUM POLICY DECLARATIONS (Continued)

POLICY NUMBER: 57 SBM BK1970

**ADDITIONAL INSUREDS: THE FOLLOWING ARE ADDITIONAL INSUREDS FOR BUSINESS
LIABILITY COVERAGE IN THIS POLICY.**

LOCATION 001 BUILDING 001
TYPE PERSON ORGANIZATION
NAME SEE FORM IH 12 00

SPECTRUM POLICY DECLARATIONS (Continued)

POLICY NUMBER: 57 SBM BK1970

BUSINESS LIABILITY	LIMITS OF INSURANCE
LIABILITY AND MEDICAL EXPENSES	\$1,000,000
MEDICAL EXPENSES - ANY ONE PERSON	\$ 10,000
PERSONAL AND ADVERTISING INJURY	\$1,000,000
DAMAGES TO PREMISES RENTED TO YOU ANY ONE PREMISES	\$1,000,000
AGGREGATE LIMITS	
PRODUCTS-COMPLETED OPERATIONS	\$2,000,000
GENERAL AGGREGATE	\$2,000,000

BUSINESS LIABILITY OPTIONAL
COVERAGES

HIRED/NON-OWNED AUTO LIABILITY \$1,000,000

UNMANNED AIRCRAFT LIABILITY
IS EXCLUDED
SEE FORM: SS 42 06

SPECTRUM POLICY DECLARATIONS (Continued)

POLICY NUMBER: 57 SBM BK1970

Location(s), Building(s), Business of Named Insured and Schedule of Coverages for Premises as designated by Number below.

Location: 001 **Building:** 001

10953 VALLEY MALL
EL MONTE CA 91731

Description of Business:
Association - Business Non Profit

Deductible: NO COVERAGE

BUILDING AND BUSINESS PERSONAL PROPERTY LIMITS OF INSURANCE

BUILDING

NO COVERAGE

BUSINESS PERSONAL PROPERTY

REPLACEMENT COST NO COVERAGE

PERSONAL PROPERTY OF OTHERS

REPLACEMENT COST NO COVERAGE

MONEY AND SECURITIES

INSIDE THE PREMISES NO COVERAGE
OUTSIDE THE PREMISES NO COVERAGE



IMPORTANT NOTICE TO POLICYHOLDERS

To help your insurance keep pace with increasing costs, we have increased your amount of insurance . . . giving you better protection in case of either a partial, or total loss to your property.

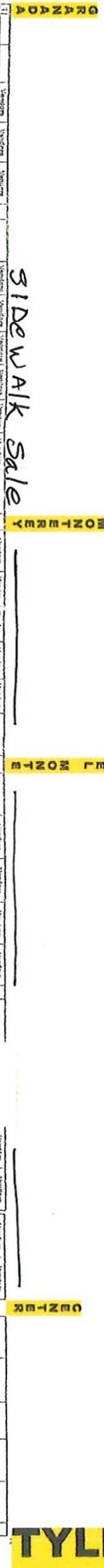
If you feel the new amount is not the proper one, please contact your agent or broker.



FESTIVAL OF CARS

OCTOBER 2020

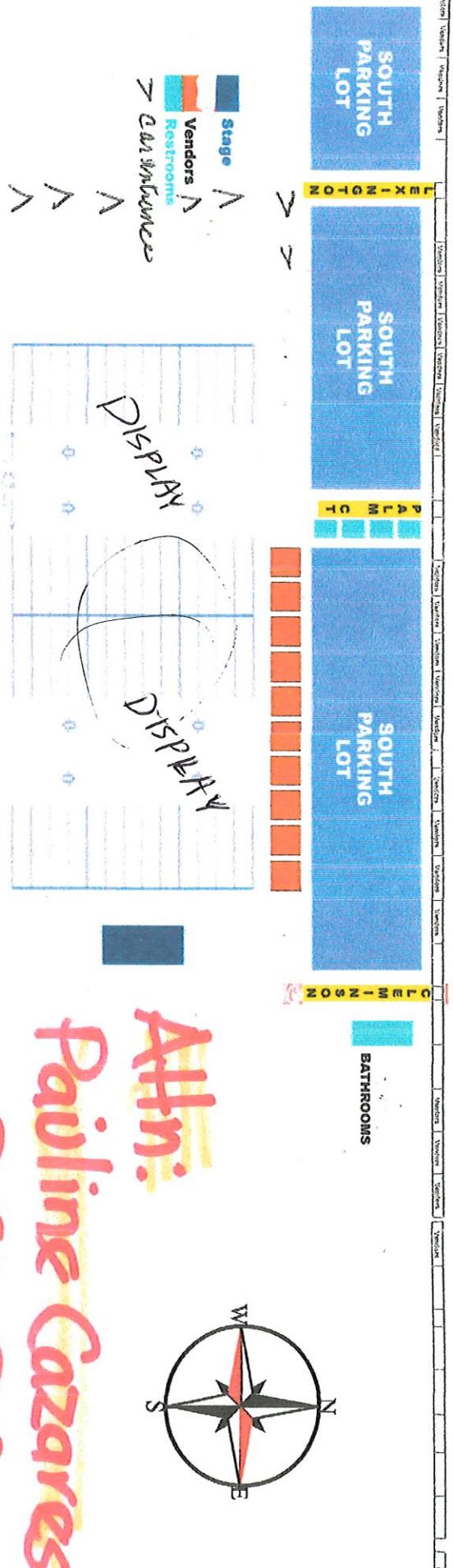
VALLEY BLVD.



sidewalk sale

Main Street

SANTA ANITA AVENUE



Attn: Pauline Cazares - DEMBA-

10

SAN BERNARDINO FWY.

TYLER AVENUE



CLASSIC CAR SHOW ON THE MAIN STREET

August 10, 2020

Dear Permit Committee:

We are pleased to announce that on October 17, 2020 Downtown El Monte Business Association (DEMBA) will be hosting a Classic Car Show from 9:00 am to 2:00 pm with a festive and colorful family-centered event along the Historical Downtown District. Sponsored by DEMBA and in Partnership with the City of El Monte, and the Police Officers Association, this FREE event will showcase DEMBA'S commitment to Family Friendly events for the community.

On the day of the event, Main Street will be transformed to "Colorful Speedway". Young participants, under the age of 12, will have the opportunity to win raffle prizes. The event promises to be inclusive of all ages. We will have DJ Carl filling the Main Street South parking lot with his great sounds. Food may be purchased at all local eateries on Main Street.

We would ask, The Permit Committee to approve this paperwork that is being presented to you. This special event is for community to enjoy. The event will also allow Main Street Merchants to participate with a booth in South Parking lot to meet with the community, promote their business and maximize their visibility in The City of El Monte.

Thank you for your prompt consideration. If you have concerns or questions you can contact us at elmontedod@yahoo.com

Sincerely,

Pauline Cazares
DEMBA Liaison/Coordinator

Blanca Medina
President of DEMBA

DOWNTOWN EL MONTE BUSINESS ASSOCIATION,
CITY OF EL MONTE & EL MONTE POLICE OFFICERS ASSOCIATION

Presents

FIESTA OF CARS

CRUISIN' FOR THE KIDS



PRIZES FOR:
Best in Show • Best Custom
Best Paint • Best Muscle Car
Best Original • Best Hot Rod
...and more!

SATURDAY • OCTOBER 17, 2020
9 am to 2 pm

FEATURING CLASSIC, VINTAGE, LOWRIDERS & MUSCLE CARS!
Location: MAIN STREET (South parking lot of Valley Mall in El Monte, CA)

\$20.00
REGISTRATION FEE
EARLY CHECK-IN: 7:30 AM

**This event will help serve the
Children in our community.**

**FREE T-SHIRT & BOXED LUNCH ON
THE DAY OF THE CAR SHOW!**

SPONSORED BY:



OWNER'S INFORMATION:

Name _____

Street Address _____

City _____ State _____ Zip _____

Phone () _____ E-mail _____

Car Info: Year _____ Color _____

Make _____ Model _____

Please submit your information and check (payable to DEMBA) to P.O. Box 5834, El Monte, CA 91731. For more info, please contact Pauline Cazares at elmontedod@yahoo.com.