

Zoning Information Guide



"Planning with People for a Better Phoenix"

City of Phoenix
PLANNING & DEVELOPMENT DEPARTMENT

EMERGENCY DECLARATION TEMPORARY OUTDOOR DINING ATUP PROCESS GUIDE

During the time period covered by the City of Phoenix's Local Emergency Declaration (in response to the COVID-19 Pandemic), restaurants located within a zoning district that permits outdoor dining and alcohol consumption will be able to expand an existing outdoor dining area without a use-permit hearing if the restaurant operator secures an Emergency Declaration Administrative Temporary Use Permit (ATUP). There is no fee for the Emergency Declaration ATUP which permits temporary outdoor dining until the Phoenix City Council rescinds the Local Emergency Declaration or upon revocation of the Emergency Declaration ATUP.

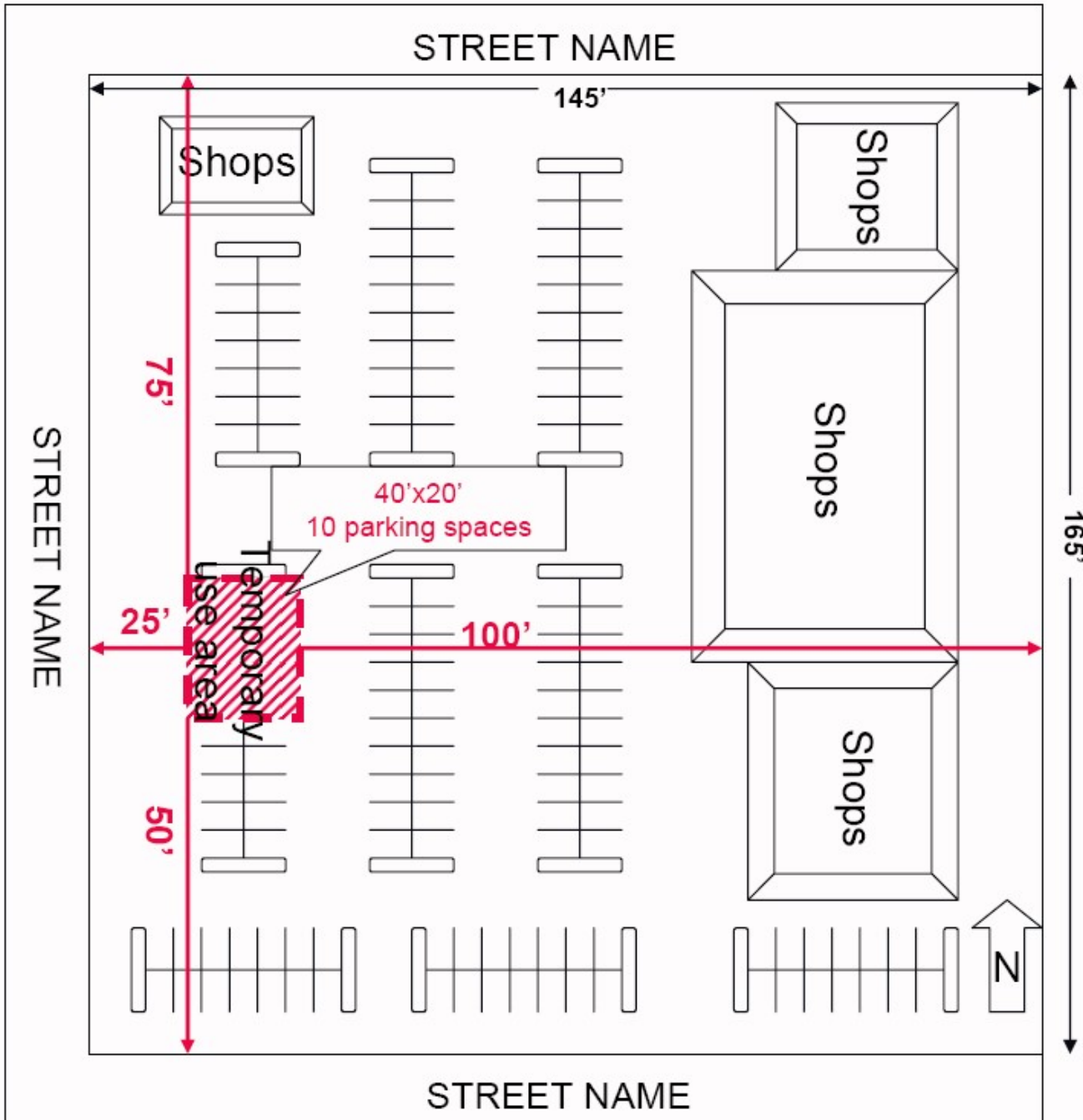
Restaurants that do not have an existing outdoor dining area shall be permitted to establish one through the Emergency Declaration ATUP process, so long as they are not within 500-feet of a residential zoning district boundary. In addition to the 500-feet, restaurants within C-1 zoned property may only expand alcohol sales if they have an approved use permit for the overall restaurant for alcohol beverage consumption and comply with Arizona State Liquor Board regulations.

An applicant wishing to expand or create outdoor dining areas in accordance with the Emergency Declaration ATUP allowances must provide the following:

1. A Temporary Outdoor Dining ATUP Application (**See Page 3**);
2. A written description of how the temporary outdoor dining area will:
 - Not occupy or impact the use of ADA facilities or public sidewalks.
 - Not eliminate required parking spaces.
 - Not block existing private or public driveways/accessways or drive aisles.
 - Not block fire lanes, loading or unloading zones, or other designated public safety areas.
3. Written authorization from the property owner authorizing use of the expanded area. If the expanded area includes public right-of-way, a Revocable Permit will be needed from the Street Transportation Department for the portion of the dining area located in the public right-of-way;
4. A site plan/sketch depicting the proposed outdoor dining area layout with dimensions. Note that any permanent structures (i.e. fencing) being constructed in conjunction with this temporary permit will require a building permit. If permanent structures are part of your plan, submit a site plan/sketch showing interior and exterior dimensions and occupancy loads, structure dimensions, construction materials and anchoring information (**See Page 2**).
5. If the request is to allow alcohol consumption in the expanded dining area, include a copy of the Temporary Extension of Premises application submitted to the Arizona State Liquor Board; and;
6. A current aerial photograph of the subject property with the temporary outdoor dining area delineated.

This document and other documents supporting the **Temporary Outdoor Dining Program – Response to COVID-19** are available at: <https://www.phoenix.gov/pdd/temp-outdoor-dining>.

Sample Site Plan



If fencing or other permanent structures are planned in conjunction with this temporary outdoor dining use, include a site plan/sketch of the interior and exterior of the property with dimensions noted. A building permit will be required. Building permit fees must be paid.

Upon request this publication will be made available in alternate formats including large print, Braille, audiotape or computer disk to accommodate a person with a disability if given reasonable advance notice. Please contact Tamra Ingersoll at 602-534-6648 or TTY: 7-1-1.

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Emergency Declaration Temporary Outdoor Dining ATUP Application

STEP 1: CHECKLIST – The following items must be submitted to zoning@phoenix.gov.

- Completed application page.
- Letter of authorization from property owner for the temporary expanded outdoor dining area.
- Site plan/sketch illustrating location of the temporary expanded outdoor dining area on subject property (See Page 2 Sample Site Plan).
- A current aerial of the subject property with the temporary outdoor dining area delineated.

STEP 2: TO BE FILLED OUT BY APPLICANT

Address of Temporary Outdoor Dining Location: _____

Assessor Parcel Number (APN): _____

* Go to <http://www.maricopa.gov/Assessor/Default.aspx> for APN(s)

Applicant / Company Name: _____

Applicant Address: _____

Applicant/Company Phone #: _____ Email Address: _____

Property Owner(s): _____

Property Owner(s) Address: _____

Property Owner Phone #: _____ Email Address: _____

Representative: _____

Address: _____

Phone #: _____ Email Address: _____

Description of Temporary Use (Attach additional pages if needed):

Dates: _____ Hours of Operation: _____ Number of Spaces for Curbside Pickup: _____

Number of Required Parking Spaces: _____ Number of Provided Parking Spaces: _____

Existing Square Footage of Indoor Dining Space: _____ Existing Occupant Load: _____

I have reviewed the entire Emergency Declaration Temporary Outdoor Dining ATUP Process Guide and understand there may be additional steps I must complete or other departments/agencies I must contact for approval of licenses, building permits or site plan approvals. I attest that the information provided with this application is correct to the best of my knowledge. I further acknowledge that this permit may be revoked if any conditions or stipulations are not met.

Signature _____

Date _____

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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: ____/____/____