

**SAN FRANCISCO ENTERTAINMENT COMMISSION
PLACE OF ENTERTAINMENT/EXTENDED-HOURS
APPLICATION QUESTIONNAIRE**

All applicants must complete this questionnaire. No application will be accepted for filing until the entire questionnaire has been completed. (If necessary, attach additional sheets to answer a question).

Date: _____

Name of Business: _____

Location of Business: _____

Business Account Number: _____

List the Entertainment Permits that you are applying for:

List the Entertainment Permits previously issued for this premises:

Describe the present use of the premises. (i.e: bar, restaurant, event space)

OPERATIONS

Days of the week open to the public: _____

Hours of operation: _____

Days and times of proposed entertainment: _____

Type of food and/or beverage service: _____

Do you have a liquor license? **(If yes, please attach a copy with any conditions)** _____

Type/Name/Permit number of liquor license: _____

If no license, describe the status of the application: _____

Do you have a public assembly permit from the Fire Department? **(If yes, please attach a copy with any conditions)** _____

Occupancy Load: _____

Number of employees and their duties: _____

Name(s) of manager(s) (e.g. Bar, Food, Security, General): _____

Days/hours these managers will be on premises: _____

ENTERTAINMENT/MUSIC

Please provide a layout of your venue indicating the location of your performance area including dimensions, and answer the following questions:

Please describe your proposed entertainment: _____

If sound amplification is to be used, specifically describe the amplification (*note: sound levels must comply with Article 29 of the SF Municipal Police Code. Your premises may require a sound test by the Entertainment Commission prior to issuance of your entertainment permit*): _____

Have you done any sound testing? _____ If yes, describe: _____

Do you have plans to do any soundproofing? _____ If yes, describe the soundproofing: _____

Please attach any acoustical consultation or other relevant materials.

Is adult entertainment to be offered? _____

If yes, describe the entertainment: _____

Is there an adult entertainment business within 1,000 feet from your premises? _____

If yes, list the business(es): _____

OUTDOOR AMPLIFIED SOUND AND/OR ENTERTAINMENT

If applicable, please provide a layout of the outdoor area indicating the performance space, including dimensions, and location of sound amplification, and answer the following questions:

Type of entertainment/outdoor amplified sound planned (e.g. live music or speech):

If sound amplification is to be used outside, specifically describe the amplification system:

Proposed days and times of outdoor amplified sound and/or entertainment:

List any hospitals, schools, houses of worship, courthouses, or public libraries within 300 feet of the premises that operate during the proposed hours of outdoor amplified sound and entertainment:

Permit applicant hereby certifies that the business shall comply with the maximum noise levels as established under Municipal Police Code, Article 15.1 Sec. 1060.16 for this outdoor premises, unless otherwise conditioned by the Entertainment Commission:

Signature

EXTENDED-HOURS (Entertainment and/or food service between 2am – 6am)
(Skip this section if not applying)

Hours of operation for proposed business: _____

Days of operation for proposed business: _____

What type of food service will you provide after 2am? _____

What type of after-hours entertainment will you offer? _____

TRAFFIC AND PARKING

Please attach a diagram to this questionnaire showing your street, and all cross-streets, alleys and driveways. Include the number of lanes, direction of travel, and whether streets are one-way, and answer the following questions:

Describe street location and cross streets: _____

Describe the parking and stopping restrictions on your block. Include both sides of the street and immediate cross-streets and alleys: _____

Where will your patrons/members park? _____

Where will truck/commercial vehicle loading/unloading occur? _____

Do you have a nearby passenger loading zone or red zone available for your use?

If yes, describe the type of zone and location: _____

How will parking be made available for persons with disabilities? _____

ZONING

What is your zoning district? (Please contact EC staff if you are unsure)

Is your business within a Special Use District? _____ If yes, please identify the district:

Identify and describe the location of any school, day care facility, playground, park, or place of worship within a two block radius of your proposed location:

CONSTRUCTION/RENOVATION

Describe any construction, renovation or other improvements planned for your premises and the timetable for completion: _____

Do you have permits for this work? _____ If not, have you applied for permits? _____

SECURITY

The San Francisco Police Code Section Article 15.1 Sec.1060.5 and Article 15.2 Sec. 1070.5 requires a “security plan” be submitted with applications for Place of Entertainment and Extended Hours Premises permits. The Entertainment Commission has requested that all permit applicants comply with this requirement. By answering the following questions, you will be submitting a plan in accordance with Police Code, and will be required to adhere to this plan once approved by the Entertainment Commission. Please attach any further information on your security plans, if available.

1) Based on your occupancy and events programming, the law requires you to hire at least one security personnel for every one hundred patrons. How many security personnel will be on site each weekday and on weekends?

2) How many exits does your venue have? _____ Will you be staffing all exits every night of the week? Please describe _____

3) **Please submit a floor plan of your venue with all security positions marked.**

4) Will you be using in-house security or will you be using an outside security company?

5) You are liable for the actions of your security personnel on your premises. If you are using in-house security, please submit a copy of your insurance coverage as it relates to security for your venue. If you are using an outside security company, please submit a copy of their insurance coverage and state licensing.

7) What kind of training and/or certification are you requiring of your security personnel (e.g. LEAD Training, Guard Cards?) *Please be aware that you must comply with State Law SB741, Proprietary Private Security Officer Registration requirements (www.bsis.ca.gov) for more information.*

8) The law requires that you secure your entire perimeter 100 feet in all directions (MPC 1060). What is your plan for doing so?

9) What are your door policies? (e.g. pat downs, bag checks, metal detectors).

10) Describe your plan to control lines or crowds on the sidewalks and streets surrounding your business (entry of patrons) as well as your plans to exit and disburse your patrons.

11) Is there a separate exterior area designated for smoking? _____

How will you deal with sound issues associated with smoking patrons?

12) What is your plan to exit patrons in case of an emergency?

13) Will you be hiring any SFPD 10B officers for events?

14) Will you have medical staff (EMT, Paramedics) on site during events at your venue?

If yes, will you be using in-house medical staff or will you be using outside medical staff company? _____

15) If you are using an outside medical staff company, please submit a copy of their insurance and state licensing.

16) If you have an ABC license that allows all ages, will you be doing all ages or 18 and over events? _____

If you have 18 and over events, what additional security will you be implementing, and how will your security and/or medical plan change?

NEIGHBORHOOD CONTACTS

All Place of Entertainment and Extended Hours Premises permits require the applicant to conduct neighborhood outreach (this will be explained during the intake meeting).

Have you met with any local neighborhood associations or other groups concerning your proposed use of the premises already? If yes, what neighborhood outreach have you done: _____

If no, please describe your plans for conducting the required neighborhood outreach:

DECLARATION

I, _____, declare under penalty of perjury that the foregoing is true and correct. I understand that any false or incomplete information provided by me in connection with this application constitutes cause to either deny the requested permit or revoke the permit if granted.

_____ I have received a copy of the Good Neighbor Policy and understand that, if granted this permit, I am required to adhere to its conditions.

_____ I agree to abide by MPC Article 15.1, entertainment regulations permit and license provisions.

_____ I have received a copy of MPC 1070, the section governing extended hours premises permits (for EHP only)

Name of Applicant

Date

Signature