Permit Services Center
Santa Monica City Hall
1685 Main Street, Room 111
Santa Monica, CA 90401
310.458.8737
pw.permits@santamonica.gov

Third Street Promenade – Access Request Form

The City of Santa Monica requires that a Use of Public Property Permit (UoPP) be issued when space is needed in the public right-of-way for construction and maintenance activities. For work on the Promenade that requires a vehicle or equipment, you must complete this form and obtain all three signatures before applying for the UoPP. Please provide a site plan with your application.

Work activity outside of 8AM-6PM weekdays and 9AM-5PM Saturday will also require an After-Hours Permit.

A Temporary Traffic Control Plan may also be required. This will be determined by your Permit Specialist at the Public Works counter at City Hall.

Applicant's Name: _____

Company: _____

Company Address: _____

Applicant's Phone Number: _____

Applicant's Email Address: _____

Project Address: _____

Dates and Times of Work: _____

Vehicles Needed: _____

Description of Work: _____

_____

_____

_____

Downtown Santa Monica, Inc.
1351 Third Street Promenade, Suite 201
Fatima Fazal, Public Space Manager 310.393.8355
Jeremy Ferguson, Director of Operations & Placemaking 310.393.8355
Fatima@downtownsm.com | Jeremy@downtownsm.com

Printed name, signature, and date: _____

Additional comments/conditions: _____

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Promenade Maintenance
2500 Michigan Avenue Bldg. 4
Jay Aguilar, Custodial Services Administrator 310.458.2201 X 2614
Ronnie Owens, Promenade Maintenance Supervisor 310.458.2201 X 6289
Jose.aguilar@santamonica.gov | Ronnie.owens@santamonica.gov

Printed name, signature, and date: _____

Additional comments/conditions: _____

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Police Department
Santa Monica Public Safety Facility
333 Olympic Drive
Jason Douglas, Operations Staff Assistant 310.458.8461
Ed Cardona, Public Services Officer Supervisor 310.458.2201 X2425
Jason.douglas@santamonica.gov | Edward.cardona@santamonica.gov

Printed name, signature, and date: _____

Additional comments/conditions: _____

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