



# City of Malibu

23825 Stuart Ranch Road · Malibu, California · 90265-4861  
Phone (310) 456-2489 · Fax (310) 456-3356 · [www.malibucity.org](http://www.malibucity.org)

## VEHICLE IMPACT PROTECTION DEVICES

### APPLICATION SUBMITTAL PACKET

**General** - The installation of vehicle impact protection devices (VIPD) is considered an exterior tenant improvement and requires an application similar to an Over-the-Counter Level II Permit from the Planning Department. In order to process the permit, the items listed on this application submittal packet must be submitted. A building permit may be required depending on the type of VIPD installed.

**Complete Submittals Required** - To submit a new application with the City of Malibu Planning Department, all items indicated on this application submittal packet must be provided at the time of submittal. Incomplete submittals will not be accepted. No appointment is necessary to submit a VIPD to the Planning Department. See the City of Malibu Planning Department New Application Submittal Guide for more information.

A **complete submittal** shall consist of the following:

1. **Application Submittal Packet**  
This page along with the items listed below.
2. **Application**  
Page 2 of this packet signed by the property owner and the applicant.
3. **Authorization to Submit Application**  
Page 3 of this packet. An applicant acting on behalf of the owner(s) shall present a notarized, written authorization signed by the property owner(s); a buyer in escrow shall present a notarized written authorization signed by the owner/seller; a lessee shall provide the property owner(s) written approval; authorizations shall give the applicant the authority to submit and process the application.
4. **Compliance Certification**  
Page 4 of this form. Compliance with ASTM F3016 S20 or S30 shall be confirmed and certified by a bollard manufacturer or structural engineer.
5. **Site Plan**  
A site plan depicting the location of the outdoor seating area(s), parking spaces, and the proposed location of the vehicle impact protection devices. The plan shall be fully dimensioned and include project address, APN, property owner name, north arrow, and scale of drawing (e.g. 1/8" = 1'). Size/Quantity - Two (2) full size original, not to exceed 24" x 36."
6. **Elevations**  
Elevations and details (color, materials, etc.) for the vehicle impact protection device.
7. **Fee**  
The appropriate application fee (\$ ) shall be paid at the time of submittal.

#### Staff use only

VIPD No. \_\_\_\_\_ Date Received: \_\_\_\_\_

Address/Unit/Tenant: \_\_\_\_\_



# City of Malibu

23825 Stuart Ranch Road · Malibu, California · 90265-4861  
Phone (310) 456-2489 · Fax (310) 456-3356 · [www.malibucity.org](http://www.malibucity.org)

## APPLICANT INFORMATION

The City of Malibu will not accept incomplete applications.

### GENERAL INFORMATION

PROJECT ADDRESS: \_\_\_\_\_

TENANT: (Commercial only) \_\_\_\_\_

TENANT / CONTACT: First: \_\_\_\_\_ Last: \_\_\_\_\_

TENANT ADDRESS: \_\_\_\_\_ Unit #: \_\_\_\_\_

PROPERTY OWNER: First: \_\_\_\_\_ Last: \_\_\_\_\_

OWNER ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

OWNER PHONE #: \_\_\_\_\_

OWNER EMAIL: \_\_\_\_\_

**\*OWNER EMAIL REQUIRED**

APPLICANT / CONTACT: First: \_\_\_\_\_ Last: \_\_\_\_\_

APPLICANT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

APPLICANT PHONE #: \_\_\_\_\_

APPLICANT EMAIL: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

### OWNER/APPLICANT/CONTRACTOR CERTIFICATIONS

The property owners, and their successors in interest, shall indemnify and defend the City of Malibu and its officers, employees and agents from and against all liability and costs relating to the City's actions concerning this project, including (without limitation) any award of litigation expenses in favor of any person or entity who seeks to challenge the validity of any of the City's actions or decisions in connection with this project. The City shall have the sole right to choose its counsel and property owners shall reimburse the City's expenses incurred in its defense of any lawsuit challenging the City's actions concerning this project.

I certify that I am presently the legal owner of the above-described property. Further, I acknowledge the filing of this application and certify that all of the information on the application is true and correct. I grant permission to the City to conduct site visits necessary to investigate the proposed project. (If the undersigned is different from the legal property owner, then a letter of authorization must accompany this form.) A licensed contractor is authorized to submit an over-the-counter application and obtain permits on behalf of the property owner. I acknowledge that the City strongly encourages me to immediately calendar the expiration date of this permit, that it is my responsibility to monitor its status and that the City has no ability to provide relief when a permit has expired.

\_\_\_\_\_  
PROPERTY OWNER SIGNATURE

\_\_\_\_\_  
PROPERTY OWNER NAME (PRINT)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPLICANT/CONTACT SIGNATURE

\_\_\_\_\_  
APPLICANT/CONTACT NAME (PRINT)

\_\_\_\_\_  
DATE



# City of Malibu

23825 Stuart Ranch Road · Malibu, California · 90265-4861  
Phone (310) 456-2489 · Fax (310) 456-3356 · [www.malibucity.org](http://www.malibucity.org)

## AUTHORIZATION TO SUBMIT A PROJECT

\_\_\_\_\_ (print name) is authorized by me/us as the owner(s) of the property located at \_\_\_\_\_, to submit an application to obtain permits from the City of Malibu Planning Department and to act on my/our behalf. This authorization will be valid until revoked by me/us in writing.

This form must be notarized if not witnessed by City of Malibu staff.

Witnessed by:

Dated: \_\_\_\_\_

\_\_\_\_\_  
Witness Signature (Staff)

\_\_\_\_\_  
Print Name



# City of Malibu

23825 Stuart Ranch Road · Malibu, California · 90265-4861  
Phone (310) 456-2489 · Fax (310) 456-3356 · [www.malibucity.org](http://www.malibucity.org)

## CERTIFICATION OF COMPLIANCE

PROJECT ADDRESS: \_\_\_\_\_ APN: \_\_\_\_\_

**NOTE: Compliance with ASTM F3016 S20 or S30 shall be confirmed and certified by a bollard manufacturer or structural engineer.**

I HEREBY CERTIFY that the vehicle impact protection devices to be installed are engineered and in compliance with the low-speed vehicle impact testing standards prescribed by the American Society for Testing and Materials ASTM F3016 S20 or S30.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Company

\_\_\_\_\_  
License # (Engineer only)



# City of Malibu

23825 Stuart Ranch Road · Malibu, California · 90265-4861  
Phone (310) 456-2489 · Fax (310) 456-3356 · [www.malibucity.org](http://www.malibucity.org)

## CERTIFICATION OF NON-STRUCTURAL COMPLIANCE

PROJECT ADDRESS: \_\_\_\_\_ APN: \_\_\_\_\_

TENANT (if applicable): \_\_\_\_\_

I HEREBY CERTIFY that the pedestrian seating area and/or head-in parking affected by MMC Section 17.48.070 (Parking Lot Safety Standards) has been brought into compliance by (describe how compliance was achieved, e.g., seating removed, etc.) as documented in the attached photographs:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

(Attach photographs depicting before and after)