

City of St. Charles TEMPORARY OUTDOOR DINING PERMIT APPLICATION

	L	Restaurant Name:					
Restaurant	tio						
	Information	Address: Phone:					
	ıfor						
44	<u> </u>	Tione.					
		Contact's Name:					
J.	t						
24-Hour	Contact	Contact's Signature:		Date:			
24-	ြ	Phone:	Email:				
		Priorie.	Ellidii.				
			l				
		e permit is required to allow for the establishme	• •	•			
Following the issuance of a permit and the establishment of the temporary outdoor dining area, the							
-		inspect the temporary outdoor dining area for	-				
	_	reas established under this permit are considered	d <u>temporary</u> and shall	not constitute a property			
righ	t in t	the form of permanent outdoor seating.					
he 1	follo	wing items must be submitted as part of the app	olication:				
		Demonstration of ownership or a letter of authorization from the property owner(s)					
A site layout plan including the overall dimensions, barriers, entrances/exits, and, traffic			/exits, and, traffic				
		circulation	,	, ,			
		A description of any proposed tents, including si	ze location and need	for electrical book-ups			
		A description of any proposed tents, including size, location, and need for electrical hook-ups					
		Any additional information which the Mayor or designee shall find reasonably necessary to a fair					
		determination as to whether the permit shall be	issued				
	Prio	or to issuance of the temporary outdoor dining pe	ermit, the permittee sl	hall provide the city with			
	сор	ies of the certificates of insurance for the require	ed policies for each typ	oe of insurance naming the			
	Citv	as an additional insured party. The required insu	rance policies shall ea	ach provide that they shall			

o Worker's Compensation Insurance in at least the required statutory limits

not be changed or cancelled during the life of the temporary outdoor dining permit.

 Comprehensive General Liability Insurance, including owner's protective liability insurance and contractual liability insurance covering claims for personal injury and property damage with limits of at least two million (\$2,000,000) dollars per occurrence, and two million (\$2,000,000) dollars for any single injury

- o <u>Dram Insurance</u>
- o Complete indemnification/hold harmless document.

Agree to Com	olv with	all Outdoor	Dining Re	auirements:
	, , , , , , , , , , , ,			-,

	All tables must be six feet apart and located away from sidewalks and walkways					
	Entrance/exit doors and fire lanes shall not be blocked					
	Allow for adequate and safe parking to be maintained for customers					
	A physical barrier around the outdoor dining area shall be required if alcohol is served or to protect the temporary dining area					
	Tents must follow manufacturers guidelines for installation, all City code requirements, and flame spread requirements.					
	If ample lighting is provided, the outdoor dining area shall close no later than as permitted under the Applicant's current liquor license in conjunction with indoor dining and drinking, as issued by the City.					
Confi	rmation of Compliance with all Restaurant Requirements:					
	Must adhere to all social distancing requirements and <u>restaurant guidelines set forth by the Illinois</u> Department of Public Health					
	Food transported from the restaurant to the outdoor dining areas shall meet all Food Safety requirements					
	Abide by all applicable requirements of the CDC, Kane County Health Department, and the Illinois Liquor Control Act.					
	Regularly clean and sanitize outdoor dining areas and all frequently touched surfaces (i.e. door handles)					
	Provide restrooms/handwashing inside the restaurant with social distancing					
Failure to abide by any of these requirements may result in the revocation of the temporary outdoor dining permit. Businesses shall not set up any expanded outdoor dining prior to being notified of permit approval.						
opera Dining	ecking the above boxes, I hereby agree confirm that the outdoor dining tions proposed in my application will comply with all of the above Outdoor g Requirements and Restaurant Requirements.					
Submit applications by email to: Building and Code Enforcement						
bceadm@stcharlesil.gov 630.377.4406						