



BOROUGH OF DOYLESTOWN
DEPARTMENT OF ZONING & PLANNING
57 W. COURT STREET, DOYLESTOWN, PA 18901
TEL: 215-345-4140 FAX: 215-345-8351

SIDEWALK DINING LICENSE APPLICATION

Valid April 1 through November 30

<u>Applicant Information</u>	<u>Property Owner Information</u>	<u>Office Use Only</u>
Applicant Name	Property Owner Name	Fee\$ _____ Cash
Applicant Address	Property Owner Address	Check # _____ Rec'd By: _____ Date: _____
Applicant Phone	Property Owner Phone	Zoned CC Cert of Insurance Attached
Dining Establishment Name	Tax Parcel Number Zoning District	Scale drawing of licensed sidewalk area including tables, chairs, and dimensions.
Dining Establishment Address	I hereby grant my consent to sidewalk dining at the above property between April 1 & October 31, _____	
Dining Establishment Phone	Signature	

PROPOSED SIDEWALK DINING AREA INFORMATION

Description of Area to Be Used as Sidewalk Dining Area: _____

Attach scale drawing of area to be used showing dining area in relation to buildings, alleyways and sidewalks. Give all dimensions including: dimensions of dining area, building frontage, and distance from curbs.

Number of tables and number of chairs per table to be used for sidewalk dining: _____

A 48" clear sidewalk traffic area must be maintained at all times.

INSURANCE INFORMATION

A Certificate of Insurance providing at least \$1,000,000 of comprehensive general liability extending premises coverage to all activities associated with sidewalk dining and listing the Borough of Doylestown as an additional insured with respect to such activities must be attached to this application.

Issuing Insurance Company: _____ Amount of Coverage: _____

Insurance Company Address: _____

Applicant hereby acknowledges and agrees that upon approval of this request for a sidewalk dining area abutting the above named premises, it will indemnify and hold harmless the Borough, its agents, servants, workmen, and employees, from any and all claims arising out of the location, occupancy, and/or use of the said area by applicant and applicant's guests and business invitees. Applicant further agrees that a Certificate of Insurance evidencing the existence of a policy of public liability insurance with an insurance company, authorized to do business in Pennsylvania, covering the location, occupancy and use of the sidewalk dining area for sidewalk dining in an amount not less than \$1,000,000, naming the Borough as an insured party, shall be maintained at in full force and effect at all times during the term of sidewalk dining, at the sole cost and expense of the applicants.

Applicant Signature _____

Date _____

OFFICE USE ONLY

Approved Denied Date: _____

Additional information required

Conditions: _____

