



TEMPORARY OUTDOOR FOOD AND RETAIL LICENSE (Expires 12/31/20)

Business Name: _____

Business Address: _____

Email: _____

Contact Person: _____

Contact Phone #: _____

REQUESTED ACTION (Please Check all Applicable)

_____ *Expand Outdoor Dining/Retail sales to Public Street when closed by Borough (see note #1)*

_____ *Expand Outdoor sales to front (Circle) and back (Circle) of current establishment (see #2)*

_____ *Expand Outdoor sales to front (Circle) and back (Circle) of ADJACENT property (see #3)*

_____ *OTHER (Describe the action you are requesting)*

NOTES

1. Must provide a certificate of insurance naming the Borough of Rutherford as an additional insured.
2. Provide a drawing of how tables, chairs and protective bollards (if needed) will be arranged on the property while maintaining pedestrian walkway.
3. Expanding to adjacent property will require written permission from the adjacent property owner and a certificate of insurance naming the Borough of Rutherford as an additional insured and hold harmless agreement for the adjacent property owner. Both must be provided to borough along with this application.

REQUIREMENTS

1. Compliance with Governor's Executive Order #150 pertaining to the Covid-19 pandemic and all safety and health protocols established by the NJ Department of Health specifically delineated in Executive Directive No. 20-014 (see attached).
2. Maintain a pedestrian walkway/fire lane and other requirements in Ch. 65 of the Borough's code.
3. **Protective barriers** will be needed in any parking lot to protect a patron from any vehicles in the lot. If the lot is closed to parking than this is not applicable. If part of the lot is to be used for both than a design drawing of location of tables and designated area with protective barriers of no less than 3000lbs will be needed to designate seating area.

OFFICIAL BOROUGH USE ONLY (Building Department)

_____ Application Complete (includes drawing)

_____ Insurance Provided

_____ Adjacent Property Owner's Permission, hold harmless agreement & insurance provided

REVIEWED BY: _____

Approved: _____

Denied: _____

Comments: _____