

APPLICATION FOR OUTDOOR SERVICE AREA PERMIT

NOTICE TO APPLICANT: Completed applications for Outdoor Service Area Permits will be reviewed within ten business days of receipt of the application and fee. Refer to the accompanying Outdoor Service Area Quick Reference Guide for additional information.

TO BE COMPLETED BY APPLICANT:			
Business Name:			
Applicant Name:			
Mailing Address:			
Telephone:			
Email:			
Property Owner(s), if diff	erent from Applicant:		
Mailing Address:			
Telephone:			
Email:			
Applicant's Legal Interest in Property:			
LOCATION OF PROPERTY:			
Street Address:			
Nearest Cross Streets:			
Sidwell Number(s):			

SUBMIT THE FOLLOWING:

- 1. Sketch plan*
- 2. Photographs or manufacturer's details of outdoor seating furnishings and fixtures. *
- 3. Signed Hold Harmless Agreement (Template provided by City.)
- 4. Certificate of Liability Insurance (Only required if the service area is within the right-of-way or on public property.)

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5. Liquor Liability Policy or Certificate of Liability Insurance (Only required if alcohol is served.)

*Refer to Outdoor Service Area Quick Reference Guide for items to be delineated and information to be provided.

Failure to provide true and accurate information on this application shall provide sufficient grounds to deny approval of an Outdoor Service Area or to revoke approval.

PROPERTY OWNER'S APPROVAL: (Initial each line)			
I hereby authorize the employees and representatives of the City of Berkley to enter upon and conduct an inspection and investigation of the above-referenced property.			
APPLICANT'S ENDORSEMENT: (Initial each line)			
All information contained therein is true and accurate to the best of my knowledge.			
I acknowledge that the City and its employees shall not be harise as a result of acceptance, processing or approval of this site plan	•		
I hereby acknowledge that fee obligations must be satisfied	prior to permit approval.		
Signature of Applicant	Date		
Applicant Name (Print)			
Signature of Property Owner Authorizing this Application	Date		
Property Owner Name (Print)			
OFFICE USE ONLY			
Received Permit #			
Outdoor Service Area Review Fee: \$370			

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