Outdoor Dining Application - Public Right-Of-Way
Online Application Questions

1. Instructions

    a. Check off that you have reviewed all of the following before starting this application:

        i. Outdoor Dining Permit & License Agreement Terms and Conditions
        ii. Exhibits Schedule: detailed instructions and examples for completing required Exhibits A-D.
        iii. Fee Schedule: Full list of fees and cost examples. (Only $750 application fee and technology surcharge is due at this time. Once application is submitted an invoice will be sent to the Contact email provided in the application.)
        iv. Additional Requirements List: permit requirements in addition to the application form, exhibits, and fees.

2. Restaurant Information
    a. Restaurant Name
    b. Restaurant Legal Name (if different)
    c. Restaurant Contact Information
        i. Name Title Email Phone #
    d. Restaurant Address Information
        i. Location Address: Street Location Address: City/State/Zip
        ii. Is Restaurant Mailing Address different from the Location Address? Y/N
            1. Restaurant Mailing Address
            2. Mailing Address: Street Mailing Address: City/State/Zip

3. Property Information

    a. Property Owner Name
        i. Mailing Address: Street Mailing Address: City/State/Zip Email
        ii. Phone #
    b. Architect
        i. Do you have an Architect? Y/N
        ii. Architect Information
            1. Name
            2. Architecture Firm Name
            3. Mailing Address: Street
            4. Mailing Address: City/State/Zip Email
            5. Phone #
    c. Contractor
        i. Do you have a Contractor? Y/N
        ii. Contractor Information

1. Name
2. Contracting Firm Name
3. Contractor State License #
4. Mailing Address: Street
5. Mailing Address: City/State/Zip Email
6. Phone #

   d. Agent
      i. Do you have a Agent or other contact not listed above? Y/N
     ii. Agent Information
1. Describe the Agent's role
2. Name
3. Agent Firm Name
4. Mailing Address: Street
5. Mailing Address: City/State/Zip Email
6. Phone #

4. Outdoor Dining Description
   a. Describe Outdoor Dining Plans Number of Tables
   b. Number of Seats
   c. Other Information
   d. Do you have an associated Building & Safety Permit #?

5. Upload Exhibits A - D
   a. Upload Exhibit A
   b. Upload Exhibit B
   c. Upload Exhibit C
   d. Upload Exhibit D

6. Submission
   a. Today's Date
   b. Signature
   c. Name of signatory: