



CITY OF SARASOTA

SIDEWALK CAFÉ

REVOCABLE RIGHT-OF-WAY USE PERMIT APPLICATION

General Information

[Please Print or Type]

BUSINESS NAME: _____

PROPERTY ADDRESS[ES]: _____

PARCEL ID NUMBER[S]: _____

APPLICATION TYPE: _____
_____ New Application
_____ Annual Renewal
_____ Addendum (Revision) to a previously approved Sidewalk Café Permit

MINIMUM SUBMISSION CHECKLIST

The following items need to be included for Sidewalk Café Permits

SUBMISSION REQUIREMENTS FOR APPLICATIONS (SEE PAGE 3 FOR MORE DETAIL):

Sidewalk Café –

- 8 1/2" X 11" professional drawing showing outdoor seating including scale and directional.
- Restaurant menu
- Copy of the Florida Department of Business and Profession Regulation License (Food Permit) and Liquor License (if applicable)
- Copy of the City of Sarasota Local Business Tax receipt.
- Certificates of Insurance **and Endorsement** (or other equivalent documentation) evidencing that the "City of Sarasota" is an additional insured (see Page 3 for more detail).
- A signed letter of support from adjacent business owners to allow sidewalk café tables and chairs to be placed in front of their respective properties (if applicable).
- Copy of Sarasota County Health Department Doggie Dining Permit (if applicable).

Tiered Flat Fees

The following is a summary of fees applicable to General and Development Applications as adopted by Resolution No. 23R-3190.

PERMIT / DEVELOPMENT REVIEW TYPE	Fees
Sidewalk Cafe Permit – base fee (\$315.69) plus \$5.00 per _____ square feet of café area.	\$315.69 +
FINAL TOTAL	

FAILURE TO SUBMIT ALL REQUIRED ITEMS WILL RESULT IN AN INCOMPLETE SUBMISSION

I HEREBY CERTIFY THAT THE STATED INFORMATION IS INCLUDED IN THE SUBMITTED PLANS AND/OR DOCUMENTS.

Date: _____

Signature of Property Owner, Lessee, Contract Purchaser, or Agent [**Circle One**]

FOR USE BY THE OFFICE OF THE CITY AUDITOR AND CLERK

RECEIVED BY: _____ **APPLICATION NUMBER:** _____
DATE: _____ **AMOUNT PAID:** _____

**REVOCABLE RIGHT-OF-WAY USE PERMIT APPLICATION****GENERAL INFORMATION**

[Please Print or Type]

I. PROPERTY OWNER, LESSEE, OR CONTRACT PURCHASER [Circle One]:

Name/Title:
Company Name:
Company Address:
City/State/Zip Code:

Cell Phone No:
Business No:
Facsimile No:
E-Mail Address:

II. AGENT OF RECORD [IF ANY]: The following individual is designated as the Agent of Record for the property owner, lessee, or contract purchaser and should receive all correspondence related to the application review and billing. [Billing information will also be sent to the above-named individual.]

Name/Title:
Company Name:
Company Address:
City/State/Zip Code:

Cell Phone No:
Business No:
Facsimile No:
E-Mail Address:

III. THE UNDERSIGNED, AS THE PROPERTY OWNER, LESSEE, CONTRACT PURCHASER, OR AGENT [Circle One], acknowledges responsibility for all City expenses associated with the referenced application(s) including time spent by City Staff and Attorneys through the date of issuance of a Final Certificate of Occupancy. [If same as #I above, note "Same". Not required for Pre-Application Conference with DRC.]

Name/Title:
Company Name:
Company Address:
City/State/Zip Code:

Cell Phone No:
Business No:
Facsimile No:
E-Mail Address:

I hereby certify that all information contained herein is true and correct.

IV. Signed this _____ day of _____, __________
Signature of Property Owner, Lessee, Contract Purchaser, or Agent **[Circle One]**

WITNESSES TO EXECUTION ON BEHALF OF APPLICANT

Witness_____
Witness_____
Print Name_____
Print Name

Submit To: The Office of the City Auditor And Clerk
1565 First Street, Room 110 – Sarasota, Florida 34236
Office Number: 941-263-6451 – Fax Number: 941-263-6222
Email: Developmentapplications@sarasotaFL.gov
www.sarasotafl.gov



CITY OF SARASOTA

SIDEWALK CAFÉ

REVOCABLE RIGHT-OF-WAY USE PERMIT APPLICATION

FOR OFFICE USE ONLY:

APPLICATION NO.:

PERMIT: FROM:

TO.:

Please complete the following:

Check One: ☐ New Application ☐ Annual Renewal (effective January 1 of each year) ☐ Addendum to Approved Permit

Total Area Occupied by the Sidewalk Café: _____ Square Feet

Will the Sidewalk Café include the following (how many)?

☐ Heaters (____)

☐ Umbrellas (____)

Will beer, wine, or other alcoholic beverages be served or consumed at the sidewalk café? ☐ Yes ☐ No

Is the café area partially or completely located in front of an adjacent business? ☐ Yes ☐ No

This is an application only and submission does not authorize the operation of the sidewalk café. The application fees are not refundable.

Operations may begin only after the permit has been issued by the City of Sarasota. The permittee shall ensure the furnishings stay out of the identified walkway. Live entertainment, amplified music, or mechanically amplified sound of any nature is not allowed within the permit area. The permittee shall be solely responsible for maintaining the permit area in a clean and sanitary condition and shall immediately remove trash or debris resulting from the operation of the sidewalk café and collect and properly dispose of such debris as may be scattered from within the permit area by patrons or weather conditions. The permitted area may also be subject to use by the City or third parties under Special Usage Agreements, Special Events Permits, or other City-authorized activities. In such cases, these uses may temporarily supersede the rights granted under this permit. Failure to follow these requirements or direction of the City Engineer could result in termination of the permit.

Include the following items with Development Application Form SWE:

- 1) A scale drawing of the requested permit area showing the layout and dimensions of the existing curb line or the lateral line of a street, identifying:
 - A minimum of 5 feet wide walking space on sidewalk area.
 - Adjacent private property lines.
 - The linear and area dimensions of the sidewalk café, which include the effective areas and offset from the tables defined in the sidewalk café plan examples.
 - Ground-floor entry of the support business.
 - Location of tables, chairs, umbrellas, heaters, doorways, handicapped ramps, pedestrian crosswalks, bus stops, taxi stands, alleyways, streetlights, utility poles, trash receptacles, benches, and trees.
 - Size of tables, chairs, umbrellas, heaters, and any other sidewalk obstruction either existing or proposed within the vicinity.
 - If in a Commercial, Tourist (CT) Zone, location of plants, electrical outlets, outdoor lighting, and/or irrigation (if in the other zones, electrical outlets, outdoor lighting, and/or irrigation are not permitted in the café areas).
- 2) The Restaurant Menu.
- 3) The current City of Sarasota Local Business Tax Receipt.
- 4) The current State of Florida Department of Business and Professional Regulation Food License.
- 5) The current State of Florida Department of Business and Professional Regulation Alcohol License (if applicable).
- 6) Certificate of Insurance issued by an insurance company licensed to do business in the State of Florida that:
 - Provides public liability and property damage insurance pertaining to the Permit Area in a minimum amount of \$1,000,000 per person and \$2,000,000 in the aggregate per occurrence, and property damage in a minimum amount of \$500,000.
 - Provides liquor liability (if applicable) in a minimum amount of \$1,000,000; and 2,000,000 in aggregate per occurrence
 - Names the City of Sarasota as an Additional Insured.
 - Provides that the policy shall not terminate or be canceled prior to the expiration date without 30 days advance written notice to the City.
- 7) Insurance Endorsement page stating that the City of Sarasota is an additional insured organization.
- 8) If the café area is partially or completely located in front of adjacent businesses, include documents indicating support from the adjacent business owners to allow sidewalk café tables and chairs to be placed in front of their respective properties. Please note that if the café is not in front of the restaurant, the café must be within 50 feet of the restaurant entrance. Also, the distance from the last café table to the restaurant entrance must be reasonable for the control and maintenance of the area.
- 9) A copy of the business' Sarasota County Health Department Doggie Dining Permit (if applicable).



CITY OF SARASOTA

SIDEWALK CAFÉ

REVOCABLE RIGHT-OF-WAY USE PERMIT APPLICATION

Business (Sidewalk Café) Name: _____

I, the undersigned, have received a copy of the Sidewalk Café Ordinance No. 22-5403, as found in City Code Chapter 30, Section 22, and the application information. I have reviewed this application and certify that all information is true and correct and agree to the Sidewalk Café Revocable Right-Of-Way Use Permit requirements

As an express condition of the issuance of the Permit and as consideration thereof, I agree to indemnify, hold harmless, and defend the City of Sarasota, its officers, agents, and employees against any and all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of any incident occurring in the sidewalk café permit area. This indemnification shall apply regardless of whether any such incident is caused, or alleged to have been caused, due to permittee's sole negligence, the City of Sarasota's sole negligence, or any joint negligence on the part of the permittee, the City of Sarasota, or any other person or entity. Further, in the event the sidewalk café has chairs, tables, umbrellas, plants, outdoor lighting, or irrigation affixed to the sidewalk or ground, and the City requires access to infrastructure located beneath the permit area, I agree to indemnify and hold harmless the City against all claims, liability, loss, injury, death, or damage whatsoever on account of or arising out of the removal of the fixed improvements.

In consideration of the issuance of this Sidewalk Café Revocable Right-Of-Way Use Permit or renewal of Permit, I agree to adhere to all standards or requirements noted here and those of Ordinance No. 22-5403 as found in City Code Chapter 30, Section 22, establishing the regulations for sidewalk cafes and any conditions of approval. I acknowledge the need for a clear sidewalk area of at least 5 feet with no obstructions. **I agree to undertake the duty of regular inspection of the permit area and informing the City's Risk Manager immediately upon discovery of any dangerous or unsafe condition by calling Risk Management at (941) 263-6339.** I have informed my staff of the clear walkway and cleanliness requirements and understand the City may seek fines through Code Compliance or revoke the permit if a walking path of 5 feet is not maintained.

I agree to make a copy of the permit, which may be a reduced size, and sidewalk café seating layout visible for the public at all times during the café operation.

Signed this _____ day of _____, _____

Signature of Property Owner, Lessee, Contract Purchaser, or Agent [Circle One]

APPROVALS:

The City Engineer certifies this application for a sidewalk café is in compliance with the design standards and performance standards of Chapter 30-22, City Code. The Sidewalk Café Revocable Right-Of-Way Use Permit is issued and expires December 31, 20____.

Date Nikesh Patel, P.E. C.P.M., City Engineer

THE FOLLOWING APPROVALS ARE REQUIRED FOR NEW APPLICATIONS ONLY:

The Director of Development Services certifies that the zoning of the real property on which the support business is located is _____ which allows for a restaurant.

Date Lucia Panica, Development Services Director

The Risk Manager, certifies that the proof of insurance, as attached hereto for the sidewalk café, meets the requirements of Section 30-22, City Code.

Date John Powers, Risk Manager

The Finance Director certifies that there are no outstanding fines, fees, taxes, or other charges due and owed to the City by the owners of the real property on which the support business is located.

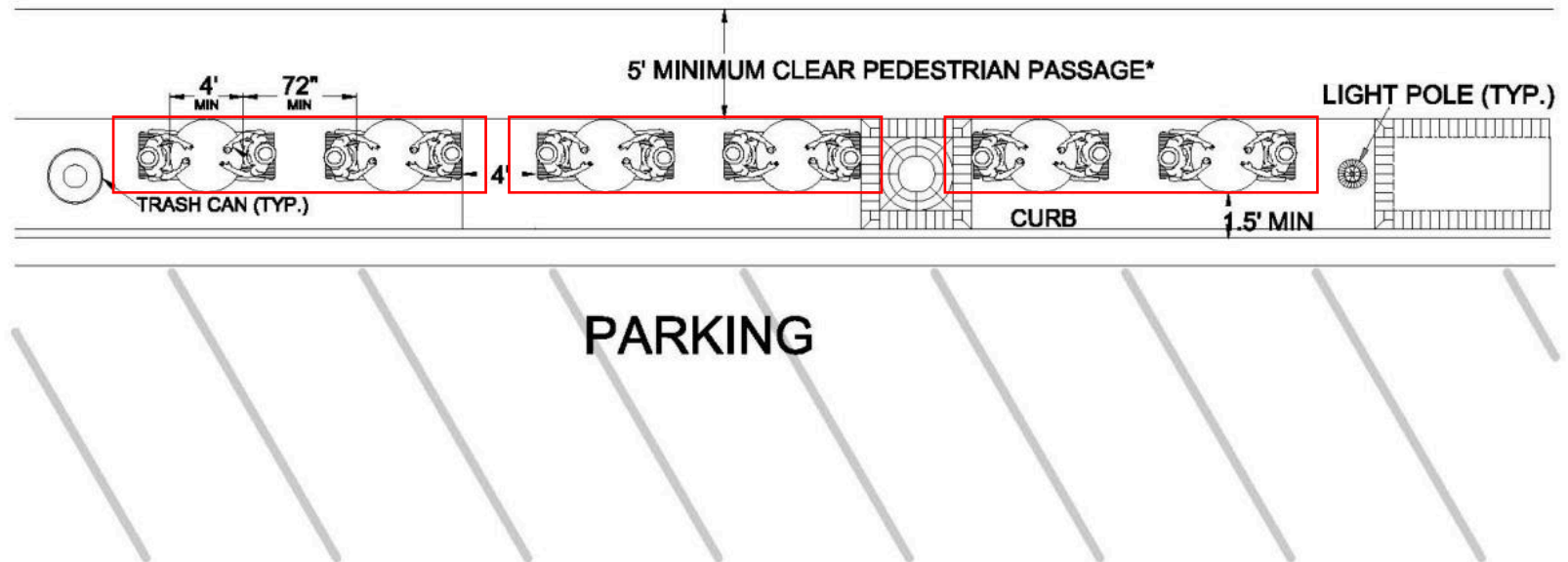
Date Kelly Strickland, Finance Director



ADJACENT BUSINESS

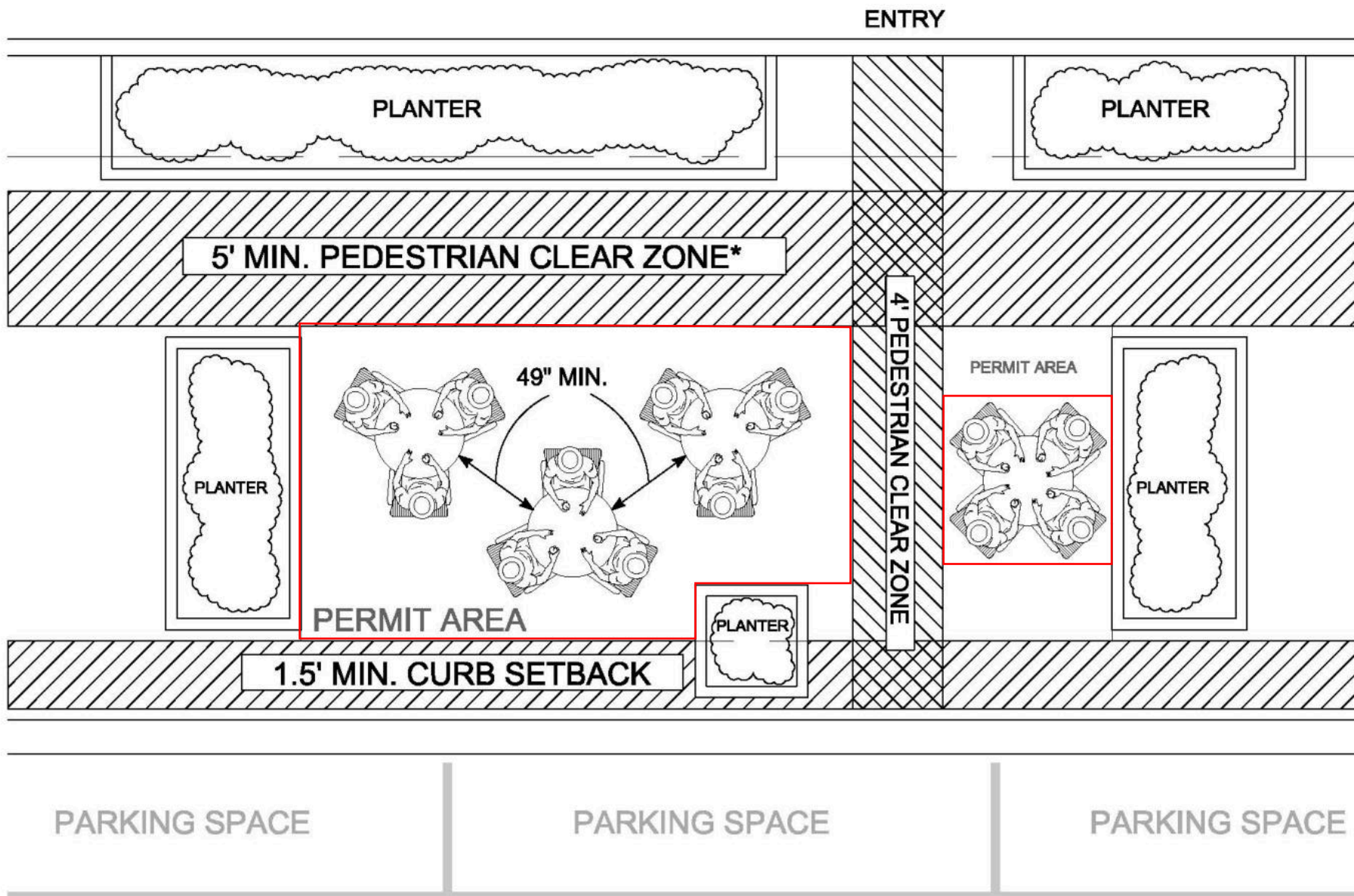
READ ITEM #5 OF FORM M
OF THE DEVELOPMENT APPLICATION

PERMITTED BUSINESS



*6' IF WALKWAY IS ADJACENT TO CURB

Permit Area – Includes the required buffer zone beyond the table to accommodate chair placement and movement.



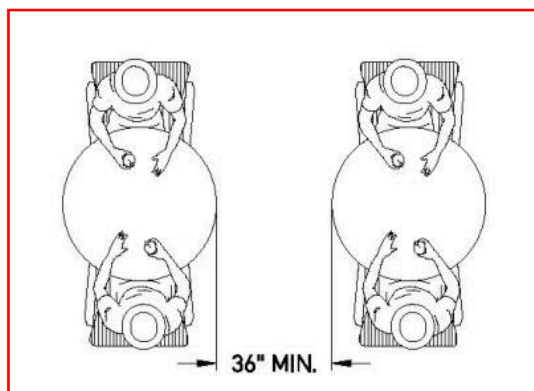
*6' IF WALKWAY IS ADJACENT TO CURB

Permit Area – Includes the required buffer zone beyond the table to accommodate chair placement and movement.

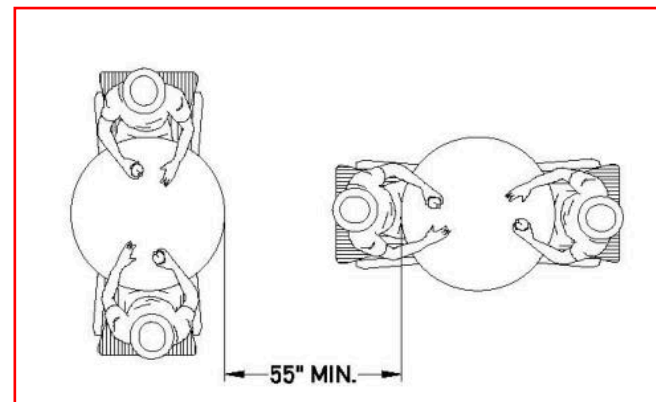


Permit Area – Includes the required buffer zone beyond the table to accommodate chair placement and movement.

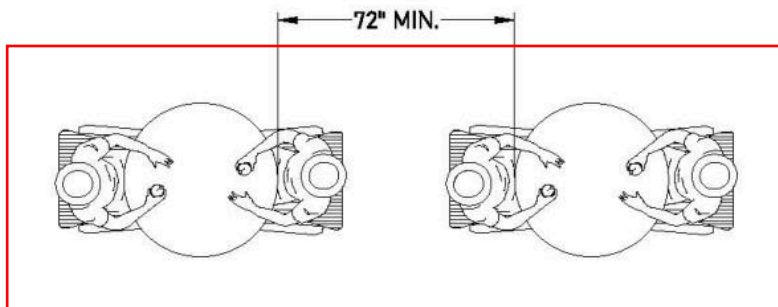
PARALLEL



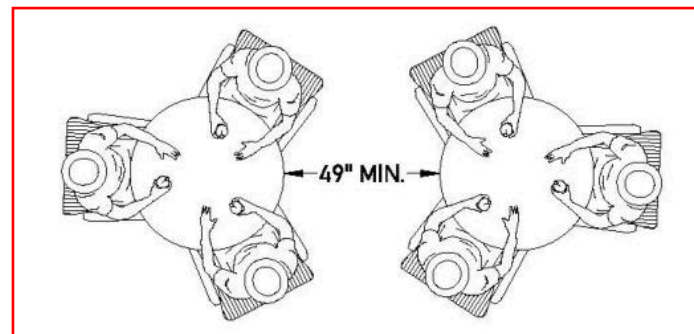
PERPENDICULAR



COLLINEAR



OBTUSE



ACORD_{TM} CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY)												
PRODUCER Address: Phone Number: Fax Number:		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.												
INSURED Owner of Restaurant Restaurant Name Restaurant Address Phone # Fax #		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:80%;">INSURERS AFFORDING COVERAGE</th> <th style="width:20%;">NAIC #</th> </tr> <tr><td>INSURER A:</td><td></td></tr> <tr><td>INSURER B:</td><td></td></tr> <tr><td>INSURER C:</td><td></td></tr> <tr><td>INSURER D:</td><td></td></tr> <tr><td>INSURER E:</td><td></td></tr> </table>	INSURERS AFFORDING COVERAGE	NAIC #	INSURER A:		INSURER B:		INSURER C:		INSURER D:		INSURER E:	
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INSURER A:														
INSURER B:														
INSURER C:														
INSURER D:														
INSURER E:														

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
		GENERAL LIABILITY ☐ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC	Policy # (Must Match Endorsement)			EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ >=1,000,000
						MED EXP (Any one person)	\$
						PERSONAL & ADV INJURY	\$
						GENERAL AGGREGATE	\$ >=2,000,000
						PRODUCTS - COMP/OP AGG	\$
		AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALL OWNED AUTOS ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ☐ NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident)	\$
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
		GARAGE LIABILITY ☐ ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
						OTHER THAN AUTO ONLY: EA ACC	\$
						AGG	\$
		EXCESS/UMBRELLA LIABILITY ☐ OCCUR ☐ CLAIMS MADE ☐ DEDUCTIBLE ☐ RETENTION \$				EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
							\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS OTH-ER	
		OTHER				E.L. EACH ACCIDENT	\$
		Liquor Liability (if applicable)				E.L. DISEASE - EA EMPLOYEE	\$
						DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

City of Sarasota is listed as additional insured with respect to:
 [Sidewalk Cafe Name]
 [Sidewalk Cafe Address]

CERTIFICATE HOLDER

City of Sarasota
 1565 1st Street
 Sarasota, FL 34236

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

POLICY NUMBER: Policy Number must match the
number on the Certificate of Insurance

COMMERCIAL GENERAL LIABILITY
CG 20 12 04 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – STATE OR GOVERNMENTAL AGENCY OR SUBDIVISION OR POLITICAL SUBDIVISION – PERMITS OR AUTHORIZATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

State Or Governmental Agency Or Subdivision Or Political Subdivision:

City of Sarasota
1565 1st Street
Sarasota, FL 34236

(The Phrase "Any City, County, or Governmental
Entity is also ensured" is also acceptable.)

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured any state or governmental agency or subdivision or political subdivision shown in the Schedule, subject to the following provisions:

1. This insurance applies only with respect to operations performed by you or on your behalf for which the state or governmental agency or subdivision or political subdivision has issued a permit or authorization.

However:

- a. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- b. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

2. This insurance does not apply to:

- a. "Bodily injury", "property damage" or "personal and advertising injury" arising out of operations performed for the federal government, state or municipality; or
- b. "Bodily injury" or "property damage" included within the "products-completed operations hazard".

- B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.