



City of Petoskey

101 East Lake Street, Petoskey, Michigan 49770 • 231 347-2500 • Fax 231 348-0350

APPLICATION FOR A LICENSE TO OPERATE AN OPEN-AIR FOOD-BEVERAGE SERVICE FROM A BUSINESS ESTABLISHMENT

INITIAL Application

RENEWAL Application

SECTION I - BUSINESS INFORMATION
Name of Business Establishment:
Street Address:

SECTION II - APPLICANT INFORMATION
Name of Applicant-Operator:
Street Address:
City, State, Zip Code:
Telephone Number: Email Address:

SECTION III - GENERAL APPLICATION REQUIREMENTS			
YES		YES	
	Site Plan Attached (<i>if renewing and no changes please indicate "plan on file"</i>)		Application Fee Enclosed (<i>see current fee schedule at www.petoskey.us</i>)
	Certificate of General Liability Insurance (Minimum \$1 Million per occurrence) with City named as additional insured included		For those with an alcohol license: Certificate of Liquor Liability Insurance (Minimum \$1 Million per occurrence) naming City as additional insured included

SECTION IV – SITE PLAN REQUIREMENTS		
Applicant Confirms		Staff's Findings
	<i>Inspections will not occur until all application materials are submitted</i>	
	Has reviewed "Design Guidelines for Downtown Street Furnishings"	
	Site plan that includes: <ul style="list-style-type: none"> Dining area dimensions indicating a minimum of 48 inches horizontal clearance and 80" vertical clearance are met Immediately adjacent buildings, including entrances and exits Number of tables and chairs are shown and information on commercial quality provided. Enclose picture of proposed furnishings. If approved liquor license, barrier type and location shown 	

SECTION V - FURNISHING DESCRIPTIONS

Furniture color will be: _____

Furniture will be: Metal Wood Composite Same as last year
If same furnishings as previously approved, no picture or documentation required.

Will planters be used? Yes No

Will barrier be used? Yes No

SECTION VI – BARRIER INSTALLATION

Will barrier anchoring system, either existing or new, be located within City right-of-way? Yes No
(sidewalk, alley, street, etc.)

If yes, the Department of Public Works Construction Division must be contacted at 231-347-2500 for approval prior to barrier installation. A permit to use public right-of-way may be required.

SECTION VII - APPLICANT COMMENTS

Please describe operation (numbers of wait staff, frequency of cleanup, etc.)

SECTION VIII - SIGNATURES

As the applicant for an outdoor dining license, I attest that all the information provided is correct.

Applicant

Date

CITY USE ONLY

STAFF COMMENTS

Large empty rectangular box for staff comments.

SITE CLEARANCE

Public Safety Approval

Date

DESIGN REVIEW

City Planner Approval

Date

BARRIER REVIEW

Public Works Approval

Date

License Issued:

License Renewed:

Denied:

License Number: _____

License effective through: _____