



APPLICATION FOR SIDEWALK CAFÉ

A sidewalk café is any group of tables and chairs, and its authorized decorative and accessory devices, situated and maintained upon the public sidewalk for use in connection with the consumption of food and beverages sold to the public from, or in, an adjoining indoor restaurant. (See Municipal Code Section 22.32) **

** Alcoholic beverages may only be served at Sidewalk Cafés pursuant to a valid liquor control license. Additional requirements must be met for alcohol service (see Municipal Code Section 22.32 (C).) **

Address of Sidewalk Café

Restaurant Name

Applicant's Name

Phone

Email

Mailing Address

City

State

Zip Code

Where will the tables and chairs be stored when the Sidewalk Café is not open?

(According to Fire Codes, the tables and chairs may not be stored in the interior of the restaurant in such a manner as to block exits, aisles, or other pathways.)

Number of Tables

Number of Chairs

Please provide a detailed sketch showing the following:

Accurate dimensions of the width of the adjacent building, the depth of the sidewalk, and the area of the proposed Sidewalk Café

All tables and chairs and barriers delineating the perimeter of the Sidewalk Café

Designated bus stops within eight (8) feet of the Sidewalk Café

Any street intersections within 20 feet of the Sidewalk Café

Any parking meters and/or planters

Fee Required: \$35.00

INSURANCE REQUIREMENTS A certificate of insurance must be on file in the office of the Ames City Clerk before a license shall be issued. Comprehensive General Liability with limits of no less than \$500,000 combined single limit per occurrence for bodily injury, personal injury and property damage. The City of Ames must be named as additional insured and a copy of the current insurance certificate shall be maintained on file with the City Clerk.

Applicant Signature

Date

Please return completed form to:

rknutsen@city.ames.ia.us

City Clerk's Office

City of Ames

PO Box 811

Ames, IA 50010

For Office Use Only

Documents Received

Date: _____

___ Completed Application

Fee

___ Fee \$35.00

Date Fee Paid _____

Insurance

___ Received _____

___ Approved _____

Follow Up

___ Application approved

___ Permits database updated

___ Permit Letter prepared

___ Letter copied and mailed

Permit Numbers _____

Special Conditions:

Application Denial Reasons:

