

City of Akron
Sidewalk Café Permit Application
For New or Modified Cafés

Applicant Information

Last Name: _____ First Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____ Phone Number: _____

Business Establishment Information

Name: _____
Address: _____
City: Akron State: Ohio Zip Code: _____ Phone Number: _____

Site Plan

- Dimensions of proposed area to be occupied by sidewalk café _____
- Hours and Days of Operation _____
- Description of food and beverage to be served: _____

Photographs and Descriptions must be provided for the following:

- Proposed area to be occupied, including the location of pedestrian diverters planned to demarcate the area: _____

- Number and arrangement of tables, chairs, and other structures: _____

- Location of entrance to establishment: _____

- Location of fire exits or fire escapes: _____

- Nature and location of any existing sidewalk obstructions: _____

Additional Licensing Information

Does the business sell liquor?

- Yes
- No

(If yes, please attach a copy of applicable liquor permit, expansion permit, and a copy of the expansion permit application submitted to the Division of Liquor Control)

Please provide a copy of the following:

- All required health licenses that have been obtained.
- All required health licenses that have been applied for.
- An insurance policy providing: such public liability, food products liability, and property damage insurance as will protect permittee and the city from all claims for damage to property or bodily injury, including death, which may arise from operations under the permit or in connection therewith. Such insurance shall provide coverage in an amount of not less than one million dollars on account of an accident involving injuries, including death, to one or more persons and property damage insurance in an amount of not less than one million dollars, or a combined single limit of one million dollars, naming the City of Akron and its officers and employees as an additional insured, and shall further provide that the policy shall not terminate or be canceled prior to the expiration date of the permit without thirty days' written notice to the Director of Public Service.

Assertions of Applicant

I certify that I, _____, am the owner or authorized person of the business establishment immediately adjacent to the proposed area that is to be occupied by the sidewalk café, and that my business meets all the requirements of the Zoning Code.

The Applicant agrees to indemnify, defend, and save harmless the City of Akron, its employees, agents, contractors, and assigns from all claims and lawsuits of any kind arising from this permit. The Applicant further releases the City from any responsibility or liability for damage to Applicant's (or its agents, contractors, or subcontractors) private property however caused, and from any responsibility for any costs occasioned by any activity carried on under the terms of the permit.

This application is to be accompanied by a fee of \$ _____. All permits will be valid for a 12-month period and must be renewed January 1st annually. This fee can be paid by cash, check, or credit card to the City of Akron Plans and Permits Center. All sidewalk café permits are subject to Akron Municipal Code 98.05 and may be suspended or revoked if the permittee or his agent fails to abide by the rules, regulations, and laws applicable.

City of Akron Plans and Permits Center
1030 E. Tallmadge Avenue
Akron, OH 44310
330-375-2010

Signature of Applicant

Date