

TOWN OF DUXBURY APPLICATION APPROVAL FOR EXTENDED USE OF PROPERTY FOR OUTDOOR DINING

COVID-19 EMERGENCY MEASURES

Name of Business:			_	
Address:				
Owner Name:				
Owner Phone:				
Owner Email:				
Manager Name:				
Manager Phone:				
Manager Email:				
Dining: Outdoor food	services <u>without</u> alcohol services <u>with</u> alcohol* ding to serve alcoholic bevere ilar structure proposed?	-		
If Yes, describe tent or stru	ucture:			
Expected days of week and hours of outdoor operation:				
Daily maintenance and cle	aning plan:			
Plan for securing fixtures of	luring evening and closed ho	ours:		

Required Attachments:

- Area Plan: Provide a neatly drawn schematic depicting the precise area of the proposed outdoor dining or retail area, the arrangement of outdoor furniture, approximate square footage of area, number of tables, number of seats, perimeter fencing, café umbrellas, outdoor heaters, and any other equipment. Areas designated for pick-up of takeout food or retail products shall also be shown. Table sets (tables including their chairs) shall be separated by at least six feet when patrons are seated. Take-out food pickup shall be a minimum of six feet from patron seating.
- <u>Property Control</u>: The applicant shall demonstrate a legal right of access to use the proposed outdoor space, either through ownership, lease or written permission of the owner. Outdoor dining may be allowed on public sidewalks, within the Town's public right of way or on any other Town-owned property, only if approved, in writing and in accordance with the terms of a license to use public property.
- <u>Insurance</u>: The Applicant shall provide a Certificate of Insurance meeting the requirements set forth in the Rules and Regulations for Outdoor Retail and Dining.
- <u>Permits and Approvals</u>: If the Applicant intends to erect any tents or structures, the applicant shall consult with the Building Department and comply with permit requirements, if any, before they are erected.
- Acknowledgments of Rules and Regulations: The Applicant shall acknowledge receipt of the Rules and Regulations for Outdoor Dining and its intent to be bound by and comply with all such Rules and Regulations.

I HEREBY CERTIFY UNDER THE PAINS AND PENALTIES OF PERJURY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND ACCURATE AND THAT I AM DULY AUTHORIZED TO ENTER INTO BINDING AGREEMENTS ON BEHALF OF THE APPLICANT.

		(If different from Business owner)	
Owner	r/Manager Signature:	Landlord signature:	
Name	(printed):	Name (printed):	
Date:		Date:	
	e submit application and required docu iff in mailbox at entrance to Town Man	ments to Nancy O'Connor at <u>oconnor@town.duxbury.ma.u.</u> ger's/Board of Selectmen's office)	<u>s</u> 0
TOWN	I OF DUXBURY APPROVAL BY:		
Mr. Re	ené J. Read, Town Manager	Date	
Town	Internal Routing, with approval receive	d as necessary:	
	Board of Selectmen		
	Town Manager / ADA Officer		
	Health Agent		
	Police Chief		
	Fire Chief		
	Building Inspector		
	Town Planner		