

CITY OF MACOMB

APPLICATION FOR OUTDOOR CAFÉ PERMIT

\$50.00 Permit Fee for One Year

Business Name: _____

Owner's Name: _____

Business Address: _____

Telephone Number: _____

Email Address: _____

Dates for Outdoor Café: _____

Hours of Operation: _____

Please attached the following Required Documents:

_____ Valid Permit License from the Health Department

_____ Scaled drawing of area which includes location, size and type of tables and chair, trash receptacles and other equipment to be used, ingress and egress curb line, existing public or utility owned equipment facilities, parking meters, tree, manhole covers, utility poles, etc.

_____ Certificate of Insurance listing required coverage amounts and policy periods of permittee's general liability policies.

_____ Written Consent form from abutting property owner if applicable.

_____ Waiver of Liability form

OFFICE USE ONLY:

Approved _____

Denied _____

Date: _____

By: _____
City Administrator