Sidewalk Café Permit Program Guidelines and Checklist

who to contact
Licensing Division

Phone: 305-809-3959
PO Box 1409, Key West, FL 33040

PLEASE READ ALL INSTRUCTIONS CAREFULLY

This form can be filled out by hand or via computer. (Applicant must have the latest version of Adobe Acrobat to complete the application electronically).

For questions, please call the Licensing Division at 305-809-3959.

APPLICATION CHECKLIST

The following documents must be submitted with this application. Incorrect or missing information can delay or deny your application.

☐ Copy of valid City Business Tax Receipt

☐ Copy of State Business License

☐ Copy of Commercial General Liability Insurance, on an annual basis

(See Application Instructions, Question 20)

☐ Photographs of the proposed sidewalk cafe equipment including tables and chairs. Include a brief description of materials. Requests for equipment modifications must be submitted in writing for approval.

☐ Copy of State Alcoholic Beverage License (if applicable)

☐ Copy of State Alcoholic Beverage Extension Approval (if applicable) (see Application Instructions, Question 23)

☐ Copy of Alcoholic-License Liability Insurance (if applicable)

☐ Hold Harmless Agreement

☐ Affidavit of Non-Objection from adjacent businesses and property owner. (If also requesting cafe seating tables and chairs in front of adjacent business. Consent/affidavits must be kept current.)

☐ Site plan of Sidewalk Café: A drawing (to scale) providing proposed location of chairs, tables and any other equipment, dimensions of existing public ROW being used; location of trees, bushes trash receptacles, fire hydrants etc.; property lines; Must show the pedestrian pathway. Must show 4 feet clearance, etc. – see Application Instruction, Question 23.
FEES

ONE TIME APPLICATION FEE $100

CAFE SEAT FEES (in addition to application fee)
Impact Fee (note 1)...........................$592.20

MODIFICATION FEE (requested change to equipment or Café Seating layout) $50

PLEASE NOTE

Insurance needs to be submitted annually.
Note (1): Impact fees are per approved seat and are a one-time only fee, billed over 7 years. If the City terminates the program a prorated impact fee refund would be applied to the applicant for the current year.
APPLICATION INSTRUCTIONS

SECTION A & B ■ BUSINESS INFORMATION
Applicant must complete all questions in this section. These sections should contain the business information and business owner contact information. Any incorrect or missing information can delay or deny your application.

SECTION C ■ PROPERTY OWNER INFORMATION
Applicant must complete all questions in this section. Any incorrect or missing information can delay or deny your application.

SECTION D ■ SEATING INFORMATION
Applicant must complete all questions in this section. Any incorrect or missing information can delay or deny your application.

Question 1  Enter the total number of existing interior and exterior seats.

Question 2  Enter the number of the additional proposed outdoor café seats.

Question 3  Enter the size (dimensions) of the proposed curb side tables. Be aware that tables with an orientation parallel to the sidewalk so no chairs will be placed in the pedestrian walkway or backing up to the parked vehicles.

Question 4  Applicant must have current commercial general liability insurance in the amount of $1 million and must name the city as an additional insured.

Question 5  Enter your State Alcoholic Beverage License number. Be sure to provide a copy of your license with your application. (If applicable)

Question 6  Be sure to provide a copy of your license with your application. (If applicable)

Question 7  Applicant must have current alcoholic-license liability insurance in the amount of $1 million and must name the city as an additional insured required.

Question 8  Applicant must attach a site plan (drawing to scale) showing the layout and dimensions of the existing sidewalk area and adjacent private property, proposed location, size and number of tables, chairs, steps, planters, umbrellas, location of doorways, location of trees, bus shelters, sidewalk benches, trash receptacles, fire hydrants, signs, news racks and any other sidewalk obstruction either existing or proposed within the pedestrian area.

Question 9  Applicant must submit photographs, drawings or manufacturers’ brochures fully describing the appearance of all proposed tables, chairs, umbrellas, or other objects related to the sidewalk café. If aforementioned street furniture/equipment is to be exchanged, provide an updated application to the city.

Question 10 Businesses cannot place sidewalk seats adjacent to other businesses without consent of the adjacent business owner. Applicant must provide an affidavit of non-objection from the adjacent property and business owner(s), consenting to the operation of the sidewalk café at that location. The affidavit must include the owner and operator’s telephone number, mailing address and the property appraiser identification number.

PLEASE NOTE
Insurance needs to be submitted annually.
Thank you for applying for a City of Key West Sidewalk Café Permit. The applicant may not add seating capacity to their business until a permit has been issued. Applicants must review the Sidewalk Café Permit Guidelines and Checklist. Incomplete applications will not be accepted and/or will be returned.

**THIS APPLICATION IS FOR**
New Renewal Seating Increase [café seats only]

**PLEASE NOTE**
Insurance needs to be submitted annually.

### A. BUSINESS INFORMATION
1. Name of Business (DBA)

2. Business Site Address
   - STREET
   - CITY
   - STATE
   - ZIP CODE

3. Business Email Address

4. Business Phone
5. Business Fax

### B. BUSINESS CONTACT INFORMATION
6. Contact Name

7. Contact Phone
8. Email

### C. PROPERTY OWNER INFORMATION
9. Owner Name

10. Owner Address
    - STREET
    - CITY
    - STATE
    - ZIP CODE

11. Owner Phone
12. Email

### D. SEATING INFORMATION
13. Total no. of approved/existing interior seats

14. Total no. of approved/existing cafe seats

15. Total no. of proposed additional outdoor café seats

**Note:** Interior seats cannot be removed to increase cafe seating.
Sidewalk Café Permit Program APPLICATION

16. Are you adding additional outdoor equipment? Yes No

17. Total no. of proposed additional outdoor tables if Yes ................................................

18. Size of proposed outdoor tables ......................................................

19. I have attached a copy of my Commercial General Liability Insurance in the amount of
   $ 1 million dollars, naming the city as an additional insured party, and includes coverage of ROW. Yes No

20. State Alcoholic Beverage License no. .......................................................... Expiration date ..................................................


22. I have attached a copy of my Alcohol-License Liability Insurance in the amount of $1 million dollars, naming the city as an additional insured party. Yes No

23. I have attached a site plan (diagram/cafe seating layout) which depicts a four-foot pedestrian clearance which will be maintained at all times. Yes No

24. I have attached photographs of the proposed outdoor seating
cafe furniture the business will be using. Yes No

25. Are the additional cafe seating tables going to be placed in front of adjacent businesses? Yes No

   PLEASE NOTE: Letters of approval from each adjacent business must also be attached.
I hereby certify that the foregoing statements are true and correct to the best of my knowledge. I acknowledge receipt of the instruction sheets issued by the City of Key West regarding this application. I acknowledge that this business is governed by the City of Key West Code of Ordinances, and I am responsible for becoming familiar with the code and abiding by its requirements. I further understand that the submittal and approval of this form will require a new business certificate and payment of additional fees, including utility, business certificate, and sidewalk cafe permit fees. Pursuant to Code of Ordinances, Section 2-939, and as may be amended from time to time.

Applicant signature

Print name

Date

CITY USE ONLY (provide and attach comments)

Date Received .................................................. Sidewalk Café License # ..........................................................

CODE COMPLIANCE

Approved? Yes No Sign-off ______________________________

Date Received ..................................................

LICENSING FINAL DETERMINATION

Approved Disapproved Total no. of approved café seats

Final Approval Date ...........................................
Sidewalk Café Permit Program

HOLD HARMLESS AGREEMENT

PLEASE NOTE: Insurance shall be submitted EACH YEAR.

1. Name of Business (DBA) __________________________________________________________

2. Business Site Address __________________________________________________________
   STREET
   __________________________________________________________
   CITY __________________________________________ STATE ______ ZIP CODE

I, ________________________________________________, agree to protect, indemnify, defend, save and hold harmless the City of Key West its officers and employees from any and all claims, liability, lawsuits, damages and causes of action which may arise out of the permit or the permittee's activity on the permitted premises.

Applicant signature __________________________________________________________
Title __________________________________________

Print name __________________________________________ Date __________

NOTARY USE ONLY

SUBSCRIBE AND SWORN BEFORE ME THIS _______ DAY OF ____________________________, 20

Notary Public Signature _______________________________ NOTARY SEAL

Print Name __________________________________________

My Commission Expires ________________________________

Personally known or ID presented __________________________