

**SECTION 1 - APPLICANT'S INFORMATION** 

# **City of Hamtramck**

Office of the City Clerk 3401 Evaline, Hamtramck MI 48212 313-800-5233 ext. 821

# Application for Sidewalk Café Permit

This application is for the placement of tables and chairs, planters and fences/barriers in the city's right-of-way for selling and consuming food and beverages at a food service establishment (this permit is not for preparation of food and beverages, only for the sale and consumption).

Name of Bus	siness:		_	
Name of App	olicant:			
Business Ado	dress:			
Геlephone: (	)	Fax:()	_	
Email addres	ss:			
Applicant's S	Signature:			
Which type	of property are you ap	plying to use:		
Sidewalk	Parking Space (Lot)	Parking Space (Street)	Alley	
A business r		e, how many are you applyir er 200sq/ft of dining room s		 ss being entitle to at least one
SECTION 2 -	OWNER'S INFORMATION			
f applicant i epresentati	· · · ·	this section must be comple	eted and signed by the	property owner or a designated
Name of Pro	perty Owner:			
Address:		City email	, MI	Telephone:
)	Fax:()	email		
		perty referenced in Section 1 ant named in Section 1 to o		
Signature of	Property Owner:			
SECTION 3 -	RENEWAL PERMITS			
s your site p	lan attached? Yes	No		
f not, when	will it be submitted?			
Number of S	eats: Total S	Square Feet:		
Jours of one	eration of Sidewalk café			

#### **SECTION 3**

♦ Michigan Liquor Control Commission (MLCC) Request for Outdoor Service. If you wish to serve alcohol on your sidewalk café and your liquor license does not include an Outdoor Service Permit

In order to complete that application, you will need to first secure approval of your site plan. Once you have completed your site plan, submit this application and required attachments to the City of Hamtramck Building Department [(313)800-5233 ext. 296] to schedule a special site inspection. If the site plan is approved, you will receive a provisional Sidewalk Café Permit so that you may complete the Outdoor Service Permit application.

- ♦ A drawing or site plan showing the proposed layout of tables, chairs, railings, changes in sidewalk slope and any other obstructions to be placed or existing on the sidewalk or public right-of-way, This Sidewalk Café Plan must:
  - o Cover the entire area between the curb and the building, including curb line and building wall.
  - o Show all existing and proposed obstructions in the area, such as trees, tree grates, benches, parking meters, light posts, proposed railing location and seating plan.
  - o Contain a seating plan identifying each table and chair.
  - o Show an elevation of the railing design, including method of anchoring into the sidewalk.
  - o Identify all doors, windows and other openings on the building wall.
  - o Identify placement of traffic barriers (mandatory if alleys or parking spaces will be used)

### ♦ \$25 one-time Review Fee

## SECTION 5 - For all Sidewalk Cafés, please attach the following to this application:

- ♦ Certificate of Insurance documenting coverage for general and products liability and for property damage. The City of Hamtramck shall be named as "additional insured" on the Certificate, and the Certificate must be valid for the duration of the season, which is April 1 − October 31. The additional insured on the certificate of insurance must read as follows: "City of Hamtramck, and including all elected and appointed officials, all employees and volunteers, all boards,
- ♦ A drawing or site plan showing the proposed layout of tables, traffic barriers, chairs, railings, changes in sidewalk slope and any other obstructions to be placed or existing on the sidewalk or public right-of-way
- ♦ If you plan to use parking spaces on Conant Street or Joseph Campau Avenue, please include documentation from Wayne County Department of Public Services that this use has been approved.

\$25.00 fee paid: Above conditions approved: Insurance certificate approve	ed:
For new licenses, notice to adjacent property owner sent:	(Date)
Permit effective date: From April 1, to October 31,	

If translation services are needed to complete or understand documents, please contact the department head to request accommodations.

إذا كانت هذاك حلجة لمُعَمَات التَرجِمة لإكمال أو فهم المحتندات، يرجى الاتممال بمقرف القسم أطاب الإقامة.

ষদি নখি সম্পন্ন বা বোৰার জন্য অনুবাদ পরিষেবার প্রয়োজন হয়,অনুগ্রহ করে বাসস্থানের জন্য অনুরোধ করার জন্য ডিপার্টমেন্ট সুপারভাইজারের সাথে যোগাযোগ করুন।