



# Application for Sidewalk Café

This application is being submitted as:

A New Application     Renewal (Change to Original Application)

The undersigned applicant is (Check One):

an Individual     a Corporation/Partnership/LLC

**A. If an Individual:**

Name: \_\_\_\_\_ d/b/a: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**B. If a Corporation/Partnership/LLC:**

Name: \_\_\_\_\_ d/b/a: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Names and Address of Principal Officers:

President: \_\_\_\_\_ Address: \_\_\_\_\_

Vice President: \_\_\_\_\_ Address: \_\_\_\_\_

Secretary: \_\_\_\_\_ Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_ Address: \_\_\_\_\_

State of IL Retail Tax #: \_\_\_\_\_

**Please answer the following questions by circling Y (Yes) or N (No)**

Have you ever had a Sidewalk Café license **revoked**?    **Y / N**

If yes, state date and reason: \_\_\_\_\_  
\_\_\_\_\_

Have you read and do you understand Chapter 38 (Streets, Sidewalks, and Other Public Ways), Sections 167.1-167.10 of the Bloomington City Code which specifies Sidewalk Cafe?    **Y / N**



Specifically, have you read and do you understand? (Please Circle)

- Y / N Section 167.5, Regulations
- Y / N Insurance Requirements
- Y / N Cleaning or Damages
- Y / N Prohibited Acts
- Y / N Revocation and Suspension of License

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**OFFICE USE ONLY**

Engineering Department \_\_\_ Approved \_\_\_ Denied Date: \_\_\_\_\_

R/T class Liquor License \_\_\_ Received Date: \_\_\_\_\_

Sketch of proposed Café area \_\_\_ Received Date: \_\_\_\_\_

Original Certificate of Insurance \_\_\_ Received Date: \_\_\_\_\_

Operations Plan \_\_\_ Received Date: \_\_\_\_\_

Waiver of Liability \_\_\_ Received Date: \_\_\_\_\_

Food/Beverage Tax Form \_\_\_ Received Date: \_\_\_\_\_ \*Check with Finance



**SIDEWALK CAFÉ OPERATIONS PLAN**

1. Anticipated dates of operation:

From the \_\_\_\_ day of \_\_\_\_\_, 2018 to the \_\_\_\_ day of \_\_\_\_\_, 2018.

2. Days and hours of operation:

Sunday: \_\_\_\_\_ to \_\_\_\_\_      Wednesday: \_\_\_\_\_ to \_\_\_\_\_      Saturday: \_\_\_\_\_ to \_\_\_\_\_  
Monday: \_\_\_\_\_ to \_\_\_\_\_      Thursday: \_\_\_\_\_ to \_\_\_\_\_  
Tuesday: \_\_\_\_\_ to \_\_\_\_\_      Friday: \_\_\_\_\_ to \_\_\_\_\_

3. Days and hours of operation of adjacent food service establishment, if different from sidewalk café:

Sunday: \_\_\_\_\_ to \_\_\_\_\_      Wednesday: \_\_\_\_\_ to \_\_\_\_\_      Saturday: \_\_\_\_\_ to \_\_\_\_\_  
Monday: \_\_\_\_\_ to \_\_\_\_\_      Thursday: \_\_\_\_\_ to \_\_\_\_\_  
Tuesday: \_\_\_\_\_ to \_\_\_\_\_      Friday: \_\_\_\_\_ to \_\_\_\_\_

4. Maximum seating capacity of sidewalk café: \_\_\_\_\_

5. Total seating capacity of adjacent food service establishment and sidewalk café: \_\_\_\_\_

6. If sidewalk café with liquor service, describe method and manner of preventing liquor from being removed from the premises: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

7. Provide any additional information relevant to your plan of operation for the sidewalk café:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**SIDEWALK CAFÉ PERMIT WAIVER OF LIABILITY**

In consideration of the issuance of a permit to operate an outdoor café upon a City sidewalk, the undersigned sidewalk café operation (“Operator”) and the City agree as follows:

1. The Operator shall, to the fullest permitted by law, indemnify, defend and hold the City harmless against all claims, liability, loss, injury, death or damage, costs, including reasonable attorney fees, of whatsoever nature in connection with or arising out of the operation of the outdoor café, including but not limited to, the placement or storage of the Operator’s equipment in the outdoor café area specified in the permit. This obligation shall not require indemnification for any such claims caused by the sole negligence of the City.
2. Within seven (7) days after the billing date, the Operator shall pay to the City all amounts for damage to any City-owned equipment or facilities, or the cleaning or trash removal performed by the City, which occurred in connection with or arising out of the operation of the outdoor café.

**CITY OF BLOOMINGTON:**

**OPERATOR:**

By: \_\_\_\_\_

By: \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Operator

\_\_\_\_\_  
Signature of Operator

**APPROVED AS TO FORM:**

\_\_\_\_\_  
Jeff Jurgens, Corporation Counsel



**If you currently have a liquor license and you are requesting to serve liquor on the sidewalk, please complete this page.**

TO: The Liquor Control Commissioner of the City of Bloomington, McLean County, Illinois.

NAME OF APPLICANT: \_\_\_\_\_,  
Hereinafter referred to as the "Applicant" represents to the Bloomington Liquor Commission the following:

1. A class \_\_\_\_\_ Liquor License is currently held by the Applicant and it authorizes the sale of liquor at the following premises:

Business name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

2. The applicant has filed an application for a Sidewalk Café Permit, a copy of which is attached hereto and incorporated herein by reference and applicant herein requests a Class "O" license to authorize liquor service within the permit area.

3. The applicant agrees and acknowledges the following:

a. Any "O" license issued shall be subject to all of the rules and regulations for sidewalk cafes as set forth in Chapter 38, Section 167.1 et seq. of the Bloomington City Code and any special conditions attached to any permit issued to applicant and that any violation of those rules, regulations and/or conditions shall be cause for the revocation or suspension of Applicant's primary liquor license as well as the "O" license.

b. The issuance of the "O" license may be made subject to certain conditions and conditions may be added after issuance of the license if such conditions are in the best interests of the public.

Dated this \_\_\_\_ day of \_\_\_\_\_, 2018.

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Tari Renner, Mayor

UPDATED 06/2018