



Application for Temporary Outdoor Dining

NAME OF APPLICANT: _____

BUSINESS NAME: _____ ADDRESS OF BUSINESS: _____

MANAGER'S NAME (If different): _____ BUSINESS TELEPHONE # _____

CELL TELEPHONE # _____ EMAIL: _____

BRIEF DESCRIPTION INCLUDING DAYS OF WEEK, HOURS OF OPERATION, OTHER DETAILS: _____

MAXIMUM OCCUPANCY OF OUTDOOR DINING AREA, INCLUDING STAFF: _____

If you already hold a liquor license, would you like to extend alcohol service outside as well?

ADDITIONAL DOCUMENTS AND INFORMATION REQUIRED:

- SKETCH OF OUTDOOR DINING LOCATION
- TABLE AND CHAIR LAYOUT
- LOCATION OF EXITS/ENTRANCES
- LOCATION & SPECIFICATIONS OF OUTDOOR FURNITURE
- PROOF OF AUTHORIZATION TO USE AREA (LEASE OR LETTER)
- UPDATED MANAGEMENT PLAN
- OTHER INFORMATION TO DEMONSTRATE ACCESSIBILITY & CODE COMPLIANCE OF OUTDOOR AREA

Where is the outdoor dining area located?

- Private property I already had the right to use
- Private property I now have the right to use (attach agreement)
- Public property

ALL OUTDOOR AREAS APPROVED MUST COMPLY WITH THE [MASS FOOD SAFETY AND STANDARDS CHECKLIST](#) AND [ABCC PATIO ADVISORY](#) IF APPLICABLE.

Signature of Applicant

Date

| | |
|--------------------------------|-------|
| Approved: _____ | _____ |
| Building Commissioner | Date |
| Approved: _____ | _____ |
| Board of License Commissioners | Date |
| Approved: _____ | _____ |
| Town Manager | Date |