



Temporary Outdoor Dining Application

Town of Exeter, New Hampshire
Office of the Town Manager
10 Front Street, Exeter NH
Telephone: 603-773-6122

Issue Date: _____

License#: _____

(This area for office use only)

Please send completed applications to Darren Winham, Economic Development Director
dwinham@exeternh.gov 603-773-6122

Please complete the following application and submit it to the Economic Development Department. This is a temporary outdoor dining license that will be good through June 30, 2020 or longer with approval from the Town. The Town and business must abide by the Governor's order and the Town has the right to revoke any temporary licenses at any time for non-compliance.

Address of proposed Outdoor Dining Area ("Area"): _____

Assessor's Map: _____ Lot: _____

Zoning District: _____

Applicant: _____

Address (Street/City/State/Zip): _____

Phone number(s): _____

Email: _____

Property Owner: _____

Address (Street/City/State/Zip): _____

Phone number(s): _____

Please check the following boxes as they are completed.

- A dimensioned site plan is attached to this Application depicting the following: the existing conditions, including a depiction of public infrastructure such as curb lines, light poles, bike racks, street trees, tree grates, manhole covers, meters, licensed A-frame signs, adjacent on-street parking and loading zones, adjacent accessible sidewalk curb cuts and the like, the proposed table/chair layout plan for outdoor dining dimensioned routes of travel within the outdoor dining area and on the adjoining public sidewalk, as well as detail sheets for the proposed enclosure system, tables, chairs, trash receptacles, and the like.
- Include all existing lighting for the proposed dining area on the above dimensioned site plan. The amount of lighting will help staff determine the hours of operation for safely conducting business outside.

Copy of license from New Hampshire Liquor Commission, if applicant intends to serve alcohol.

If you are using private property include an email/signed letter from the property owner giving you permission to use their property. Please include all special requirements set forth by said property owner including certificate of insurance naming them as an additionally insured.

Permit applicant (business) shall provide proof of general liability insurance in the amount of \$1,000,000 per occurrence and \$2,000,000 aggregate, including the Town of Exeter as an additional insured on a primary and noncontributory basis. The general liability insurance policy shall not exclude claims arising from disease or pandemic, or claims occurring during a state of emergency.

Permit applicant (business) shall defend and indemnify the Town of Exeter, its officials, employees and volunteers against all demands, claims, suits and actions seeking damages, penalties, costs, interest, statutory relief and/or equitable relief on account of bodily injury, death, personal injury, property damage and/or economic injury arising out of or related to the permit or the activities of the permit applicant.

If you are using sidewalk space for patrons, you agree and understand that you will be solely responsible for cleaning the sidewalk space (including the removal of trash/dropped items from the sidewalk) daily, and that you may be required to relocate or eliminate sidewalk dining if the Department of Public Work requires access to the sidewalk space for any reason, including but not limited to, cleaning, maintaining or repairing the sidewalk or adjacent street.

I/We _____ (owner/s) of _____
_____ (restaurant name) will abide by the most recent Governor's Order set forth by the State of NH regarding outdoor dining. I/We understand the failure to do so could end up with the revocation of my temporary outdoor dining approval.

The Town Staff will not review incomplete applications. All questions must be answered and all applicable check boxes must be checked. Failure to do so shall result in an incomplete application which will not be processed. The undersigned attests that the supplied information is accurate and complete and requests that the Town Manager proceed with processing this application.

Applicant Signature

Applicant Signature

Date

Date