



SIDEWALK CAFÉ APPLICATION

City of New Port Richey
 Development Department
 City Hall, 5919 Main Street, 1st Floor
 New Port Richey, FL 34652
 Phone (727) 853-1039 * Fax (727) 853-1052

CASE # SCA _____
DRC Date: _____
Date Received: _____

- Submit eight complete applications (one original with nine copies including all attachments that are collated, stapled, folded as individual sets)
- Submit \$300 application fee

Section 7.11.14 through 7.11.21 of the Land Development Code (available on municode.com), regulates the operation of a sidewalk café on City right-of-way, adjacent to a restaurant use. The application is subject to the provisions of the Florida Statute, Sections 561 through 569 concerning alcohol beverages and other requirements of the New Port Richey Land Development Code. Complete applications will be scheduled for review by the Development Review Committee.

Property Owner and Representative Information:

Current Property Owner(s):		Phone:
Owner Address:		
Owner Email Address:		
Owner's Representative(s):	Relationship to Owner:	
Representative Mailing Address:		
Representative Email Address:	Phone:	
Primary contact: <i>(This is to whom the City will send all communication regarding this application)</i>		

Cafe Information:

Business name:		Registered fictitious name:	
Site address:		Site parcel ID:	
Dimensions of cafe area:		Area of cafe area (square feet)	
Number of interior seats:*	Number of employees:*	Number of exterior seats:*	
* Permitted number of seats plus employees is based on the number of ADA-accessible restrooms provided on site			
Hours of operation:			
Alcohol service: <i>(Requires approval by City Council)</i>			

More Cafe Information:

Exterior modifications proposed (*Show compliance with the Downtown Architectural Design Guidelines; Outside alcohol service requires barrier treatment*):

Demonstrate lighting sufficiency to illuminate cafe boundaries & adjacent pedestrian walkway for safe negotiation of potential obstructions.

Trash containment:

Explain how sidewalk cafe will be routinely maintained:

Storage location of tables, chairs, umbrellas, heaters, etc during hours when business is closed

Attachments:

- Copies of valid New Port Richey and Pasco County business tax receipts (prior to opening of cafe);
- Approval of the sidewalk café from Florida Division of Hotels and Restaurants and other agencies, if applicable (prior to opening cafe);
- Evidence of written notification to all abutting property owners (include copies of dated letter and mailing labels);
- Signed license agreement between property owner and City of New Port Richey with liability insurance naming the City as an additional insured (\$500,000 combined single limit per each occurrence);
- Eight copies of a detailed site plan (drawn to scale), not to exceed 11 inches x 17 inches, showing property dimensions and including, but not limited to, the following information:
 - Bar scale;
 - Dimensions of the sidewalk café to adjacent existing or proposed building, their uses, entrance width and locations and adequate pedestrian path adjacent to any structure or fence;
 - Width of cafe as restricted to width of front or side of adjacent restaurant;
 - Boundary of cafe as measured three feet from tables with chairs or opened umbrella;
 - Location of any above ground utilities and guide wires that might affect or be affected by the sidewalk café and including access to fire hydrants and fire connections;
 - Dimensions of the sidewalk café to the curb and centerline of the adjacent street, and to any existing or proposed public improvements including, but not limited to, benches, fire hydrants, light poles, HVAC units, landscaping, tree grates, crosswalks and handicap ramps;
 - Minimum four-foot wide pedestrian access, with special attention to abutting intersections & handicap ramps (avoiding impacts with crosswalks). *Distance is measured from the portion of the cafe boundary nearest the curb or obstruction;*
 - Minimum four-foot distance to large obstructions (including bus stops, newsstands, planters or other above-ground 15 square foot object);
 - Required barrier that complies with *Downtown Architectural Design Guidelines*, if serving alcohol;
 - Total square footage, dimensions and seating layout of proposed sidewalk café;
 - Location and dimensions of all planned improvements, including but not limited to, fencing, gates, awning, heaters, umbrellas, planters, lighting and signs, including side view with the height from grade for the improvements;
 - Proposed seating count for the outdoor café and existing restaurant occupancy;
 - Existing restaurant dimensions including dining room, kitchen and restrooms (with fixture count); and
 - Proposed signage, in compliance with Sign Code and *Downtown Architectural Design Guidelines*

Attendance at meetings:

The applicant or applicant's representative needs to attend all Development Review Committee meetings & other meetings, as applicable.

Authorization to visit the property:

Site visits to the property by City representatives are essential to process this application. The Owner/Applicant, as notarized below, hereby authorizes the City representatives to visit, photograph and post a notice on the property described in this application.

Authorization for owner's representative:

I _____, the **owner**, hereby **authorize** _____ **to act as my representative(s)** in all matters pertaining to the processing and approval of this application, including modifying the project. I agree to be bound by all representations and agreements made by the designated representative.

Signature of Current Property Owner(s): _____

Date: _____

Subscribed and sworn to before me this _____ day of _____, 20_____

who is personally known to me and/or produced _____ as identification.

STATE OF FLORIDA, COUNTY OF PASCO

Notary Public _____

My Commission Expires: _____

Applicant's affidavit:

I _____, the **owner or authorized representative**, have read and understand the contents of this application. The information contained in this application, attached exhibits and other information submitted is complete and in all aspects true and correct, to the best of my knowledge.

Signature of Owner or Authorized Representative: _____

Date: _____

Subscribed and sworn to before me this _____ day of _____, 20_____

who is personally known to me and/or produced _____ as identification.

STATE OF FLORIDA, COUNTY OF PASCO

Notary Public _____

My Commission Expires: _____