



City of Brockton

ROBERT F. SULLIVAN
MAYOR

SUPPLEMENTAL APPLICATION FOR TEMPORARY OUTDOOR TABLE SERVICE ON A PUBLIC WAY

Note: This application is to be used only for temporary permitting of outdoor table service during the period in which applicable COVID-19 Emergency Orders are in effect.

Instructions: This supplemental application is to be completed ONLY by applicants seeking outdoor dining on public sidewalks and/or streets as part of their Application for Temporary Extension of Premises for Outdoor Table Service. Please be advised that any restaurant approved for outdoor table service on a public way will be required to enter a License Agreement with the City and provide proof of general liability insurance, providing coverage of at least \$1 million per occurrence, and naming the City of Brockton as an additional insured.

1. BUSINESS ENTITY AND CONTACT INFORMATION

Restaurant Name (D/B/A): _____

Legal Name (Individual/Corporation), if different: _____

Restaurant Address: _____

Applicant/ Contact Name: _____

Title (e.g. Owner, Manager, etc.): _____

Email Address: _____

Telephone Number: _____

2. PROPOSED AREA FOR OUTDOOR TABLE SERVICE ON A PUBLIC WAY

Please provide a complete description of the public sidewalk and/or street area you would like to utilize for outdoor table service. Please include in your description the adjacent property addresses, the approximate square footage of the proposed area, the proposed number and location of tables, chairs and other equipment in the public way, and the proposed barriers and/or fencing that will be used to separate patrons from non-patrons in the public way. *Please include additional pages as necessary.*

Will alcohol be served in the proposed outdoor dining area? ☐ Yes ☐ No

3. APPLICANT'S CERTIFICATION

I, authorized signatory, hereby submit this application to the City of Brockton for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- a. I understand that no placement of obstructions and no service of food or alcohol will be permitted on a public sidewalk or street until my establishment has entered into a License Agreement with the City of Brockton and provided proof of general liability insurance, providing coverage of at least \$1 million per occurrence, and naming the City of Brockton as an additional insured.

Signature of Applicant

Date

Name of Authorized Signatory (please print/type)

Title