

APPLICATION AND GUIDE FOR OUTDOOR SEATING ON TOWN SIDEWALKS

Pursuant to Chapter IX, Sections 16-19 of the Town of Maynard By-laws, a license must be obtained annually from the Board of Selectmen for the temporary use of a portion of a sidewalk immediately adjoining a business. A license is valid through December 31. The following steps must be completed for the Board to consider any request for such a permit. The nonrefundable application fee is \$____.00.

1. Complete the attached Application. Sign and date the Release and Indemnity Agreement to Encumber A Public Way. Fill in and sign the top half of the Certificate of Good Standing. Fill in and sign the State Dept. of Industrial Accidents Workers' Compensation Insurance Affidavit.
2. If you are a restaurant applying for outdoor seating, make sure that your toilet facilities are sufficient for the total capacity of the indoor seating AND the outdoor seating you are seeking. You must comply at all times with Massachusetts regulations for minimum toilet facilities (248 CMR 10.10).
3. If you are applying for a new license or making any changes to your license this year, proceed to the Department of Public Works to obtain a sign-off.
4. Proceed to the Town Treasurer-Collector to confirm that all taxes and fees have been paid and obtain a sign-off on the Certificate of Good Standing,
5. Designate the Town of Maynard as an Additional Insured on your business liability insurance, or obtain a City and County Licenses and Permits Bond in the amount of \$5,000.
6. Finally, sign and date the Application and Conditions and file it with the Town Clerk. The Clerk will submit the Application to the Board of Selectmen for approval. The Board meets on the 1st and 3rd Tuesday of each month at 7:00 p.m. at Town Hall in the Michael J. Gianotis Room.

**APPLICATION FOR OUTDOOR SEATING, OR OTHER
PROPERTY ON TOWN PROPERTY**

FOR TOWN CLERK'S OFFICE ONLY
Date Recorded _____
Amount Paid _____

Nonrefundable Application Fee \$ _____ .00

Date _____

- New Application
- Renewing Application with Additions or Changes
- Renewing Application with NO Additions or Changes

Business (DBA) Name: _____ Phone: _____

Business Location in Maynard: _____

Applicant's Federal Employer Identification Number: _____

Applicant's Legal Name: _____

Mailing Name (where we should send correspondence to): _____

Mailing Address (with Zip Code): _____

Emergency Contact: _____ Phone: _____

Type of Business (Check Only One and Provide the Names Indicated):
<input type="checkbox"/> Sole Proprietor: Name of Owner: _____
<input type="checkbox"/> Partnership (Inc., LLP): Name of Partnership: _____
Names of All Partners Who Own More Than 10%: _____
<input type="checkbox"/> Trust: Name of Trust: _____
Names of All Trustees Who Own More Than 10%: _____
<input type="checkbox"/> Corporation: Name of Corporation: _____
Name of President: _____
Name of Secretary: _____ Name of Treasurer: _____
<input type="checkbox"/> LLC: Name of LLC: _____
Names of All Managers Who Own More Than 10%: _____
<input type="checkbox"/> Other (Attach a Description of the Form of Ownership and the Names of Owners)

Business (DBA) Name: _____

Application for:

_____ tables and _____ chairs.

_____ A-frame sign.

_____ Other: _____

Provide a detailed description of the request, including the location of the items on the sidewalk or public way: _____

Attach a scale plan on 8½" x 11" paper, showing the location and dimensions of the seating, containment area, the sidewalk or public way, and any signs, trees, or other obstructions.

RELEASE AND INDEMNITY AGREEMENT TO ENCUMBER A PUBLIC WAY

I, the undersigned Applicant or Duly Authorized Agent, hereby agree to release, discharge and hold harmless, the Town of Maynard, a municipal corporation of the Commonwealth of Massachusetts, and its officers, employees, agents and servants from all actions, causes of action, claims, demands, damages, costs, loss of services, expenses and compensation associated with the undersigned's use of the public way as described herein.

Signature of Applicant: _____ Date: _____

ACKNOWLEDGEMENT

I hereby state that all information provided on this application is true and accurate, and I understand that any information that is found to be false or misleading may result in the forfeiture of this license. This license will be subject to all of the terms, conditions, and limitations set forth in the Town of Maynard By-laws, any applicable State and Federal laws, and any conditions prescribed by the Town of Maynard. I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all State tax returns and paid all State taxes required under law.

Signature of Applicant: _____ Date: _____

Print Name: _____ Phone: _____

FOR ALL NEW OR CHANGING APPLICATIONS:

TOWN ENGINEER APPROVAL:

The Plan is compliant with the Americans with Disabilities Act: _____ Yes _____ No.

Additional conditions _____

Signature: _____ Name and Title: _____

LICENSE CONDITIONS

1. This license is issued annually and is valid through December 31.
2. The Applicant agrees to use only those items described in the description and attached plan, and place all items on the sidewalk or public way in such a manner as not to obstruct pedestrian traffic and to permit an unobstructed path of travel in accordance with applicable federal and state law. The Applicant agrees to maintain a minimum clearance of ____ from streetlights, signs, trees, benches, Town garbage barrels, or other sidewalk obstacles at all times.
3. The Applicant agrees to submit a City and County Licenses and Permits Bond in the amount of \$5,000, or a current Certificate of Insurance listing the Town of Maynard as an Additional Insured on the business liability insurance in a form satisfactory to the Town before the License will be issued.
4. The Applicant shall comply at all times with 248 CMR 10.10 (minimum toilet facilities), and hereby certifies that the Applicant has sufficient toilet facilities to accommodate the maximum indoor and outdoor seating capacity.
5. The Applicant shall install a containment system, which is satisfactory to the Town, around the periphery of the outdoor seating area in order to delineate and separate the proposed use from the public sidewalk or public way and which will not interfere with curb ramps, driveways, fire escapes, and/or doorways.
6. The Applicant shall close all outdoor seating no later than ____ PM.
7. The Applicant acknowledges that the service of alcohol in the outdoor seating area is prohibited, and may result in criminal and/or civil sanctions, unless separately licensed by the Licensing Commission.
8. The Applicant shall place and maintain a trash receptacle on the sidewalk or public way in front of the business in order to minimize extra litter associated with outdoor seating.
6. Permission for outdoor seating on Town property is revocable at the discretion of the Board of Selectmen.

Signature of Applicant: _____ Date: _____

Approved by: _____ Date: _____

TOWN OF MAYNARD

BOARD OF SELECTMEN

Chris DiSilva

Melissa Levine-Piro

David Gavin

Justine St. John

Armand Diarbekirian

CERTIFICATE OF GOOD STANDING

Exact name of taxpayer/applicant's business: _____

Address of taxpayer/applicant's business in Maynard: _____

Address of taxpayer/applicant's home in Maynard: _____

Taxpayer/applicant's phone: day: _____ evening: _____

I, _____, the undersigned Taxpayer, do hereby certify that all the information contained herein is true and correct and all taxes and fees due the Town have been paid or that the Taxpayer has entered into an agreement to pay all taxes and fees and is current on said agreement.

SIGNED UNDER THE PAINS AND PENALTIES OF PERJURY, this _____ day of

_____, 20____. _____

(Taxpayer's signature)

TOWN ACKNOWLEDGEMENT

DATE OF ISSUANCE: _____

TAXES AND ACCOUNT NUMBER(S) INCLUDED IN CERTIFICATE:

Real Estate	Water/Sewer	Personal Property	Other: ____
# _____	# _____	# _____	# _____

NOTES:

CLERK'S INITIALS: _____

ORIGINAL STAMP: