

CITY OF HAMMOND
USE OF PUBLIC SIDEWALK PERMIT APPLICATION

FILING DATE: ___/___/___ PERMIT# _____

APPLICANT NAME: _____ Business Owner Manager

First Name MI Last Name

BUSINESS NAME: _____

BUSINESS MAILING ADDRESS: _____

Street or PO Box Number City State Zip

BUSINESS PHONE: (_____) _____ FAX: (_____) _____

Email: _____

PARCEL# _____ (PLEASE VERIFY PARCEL ADDRESS & # W/GIS DEPT.)

SITE (PHYSICAL) LOCATION: _____

Street Address Number & Street Name

PROPERTY OWNER NAME: _____

(If different than Applicant Name above.) First Name MI Last Name

COMPANY NAME: _____

Owner Address: _____

Street Name/Street Number City State Zip

Telephone: (_____) _____ Fax: (_____) _____

Email: _____

INSURANCE

Liability Insurance Company Name: _____

Liability Insurance Company Address: _____

Street or PO Box Number City State Zip

Policy # _____ Policy Limits \$ _____

Insurance Company Contact Person: _____ Phone # (____) _____

First Name MI Last Name

NOTICE: Applicant please read the following and sign below to complete this application.

1. The City Building Inspector must give approval of the areas designated for such use after proper inspection to assure public safety, and must issue a permit for use thereon.
2. Such permit is valid only for the service of food or beverage.
3. The business or owner requesting such permit must be located in the Downtown Development District.
4. The business or owner requesting such permit must provide the City of Hammond with satisfactory evidence of general liability insurance coverage naming the City as an additional insured, in an amount not less than \$250,000.00, with such insurance carriers acceptable to the City.
5. The business or owner requesting such permit shall be responsible for the cleaning of all public sidewalks immediately adjacent to his place of business at such times and in a manner acceptable to the City Building Inspector.
6. The tables or chairs must be used solely for food or beverage service.
7. There must be enough remaining sidewalk space left for pedestrian traffic to pass without walking in the street.

I certify that the above information is true and correct. I agree to abide by all City of Hammond ordinances, rules, and regulations governing the service of food or beverage on City sidewalks.

X _____ DATE _____

APPLICANT SIGNATURE

APPROVAL:

BUILDING OFFICIAL DATE

NOTE: Attach sidewalk pictures and proof of insurance.

*****FOR OFFICIAL USE*****

PERMIT FEE: \$25.00 CHECK# _____ CASH DATE PAID ___/___/___