



PERMIT APPLICATION
SIDEWALK CAFÉ

PERMIT #: _____

CITY OF KINGS MOUNTAIN CODE ENFORCEMENT DEPARTMENT
N. PIEDMONT AVENUE - PO BOX 429 - KINGS MOUNTAIN, NC 28086
PHONE (704)734-4599 – FAX (704)730-2106 E-MAIL: tammy.scruggs@cityofkm.com

- A SITE PLAN WITH THE FOLLOWING INFORMATION SHALL BE SUBMITTED WITH THIS APPLICATION.
- The dimensions of the proposed sidewalk café area
 - The position and number of tables, chairs and other sidewalk café related elements
 - The distance between the boundaries of the sidewalk café area and all adjacent street curbs, buildings, property lines, street intersections, alleys, fire hydrants and FDC (Fire Department Connection) locations.
 - Any other items which show that the proposed sidewalk café will not interfere with any of the following: (1) pedestrian flow; (2) access to building entrances; (3) exit access and exit discharge; (4) pedestrian and traffic safety; (5) the aesthetic quality of the surrounding area
 - A statement of the seating capacity of the proposed sidewalk café and of the existing retail food establishment actually operated by the applicant in the adjacent building.
- SUBMIT WITH THIS APPLICATION COPIES OF ALL PERMITS AND LICENSES SHOWING REQUIRED APPROVALS BY THE COUNTY HEALTH DEPARTMENT AND/OR ANY OTHER APPLICABLE REGULATORY AGENCIES.
- SUBMIT WITH THIS APPLICATION DOCUMENTATION OF PUBLIC LIABILITY INSURANCE IN THE AMOUNT OF \$1,000,000.00 INSURING AGAINST PERSONAL INJURY, WRONGFUL DEATH AND PROPERTY DAMAGES, INCLUDING THE CITY AS A PART INSURED AND INSURING THE CITY AGAINST ANY LIABILITY FROM THE USES PERMITTED PURSUANT TO THE CITY OF KINGS MOUNTAIN ORDINANCE 17-06, CHAPTER 130.10.
- SUBMIT WRITTEN CONSENT TO ENTER INTO A HOLD-HARMLESS AGREEMENT WITH THE CITY OF KINGS MOUNTAIN.
- IF THE PERMIT APPLICANT IS NOT THE OWNER OF THE BUILDING, SUBMIT WRITTEN CONSENTMENT TO THE ESTABLISHMENT OF A SIDEWALK CAFÉ FROM THE OWNER OF THE BUILDING IN WHICH THE RESTAURANT IS LOCATED.
- SUBMIT WRITTEN APPROVAL FROM THE DESIGN REVIEW COMMITTEE OF THE CITY OF KINGS MOUNTAIN MAIN STREET PROGRAM FOR A SIDEWALK CAFÉ TO BE LOCATED IN THE KINGS MOUNTAIN MUNICIPAL SERVICE DISTRICT.

PROJECT ADDRESS: _____

OWNERS INFORMATION

OWNER'S NAME: _____

OWNER'S ADDRESS: _____

PHONE NUMBER: _____ EMAIL: _____

APPLICANT'S SIGNATURE AND PRINTED

PHONE NUMBER

DATE

By signing above I hereby certify that I am either the owner of the property or an authorized agent of the owner and that the information in this application is correct and that all work will comply with applicable State laws and local ordinances.