City of Rockford Finance Department – Revenue
1st floor, City Hall, 425 E. State Street, Rockford, IL
815-967-6753

LICENSE APPLICATION – OUTDOOR/SIDEWALK CAFE

THIS APPLICATION **MUST** BE ACCOMPANIED BY THE $75. LICENSE FEE.

APPLICANT Name/Position:_____ Date of Application:_____

Applicant Address:_____
Street City/State/Zip

Applicant Phone #:_____ Email Address:_____

Business Name:_____Tax ID:_____

Business Address:_____
Street City/State/Zip

Hours and Days of Operation: _____

Number of Patrons Accommodated: _____

The following information must be submitted with the application:

1. How the premise will be supervised and maintained
2. Description or photo of street furniture to be used in accordance with the Outdoor Dining Design Guidelines
3. Five copies of plat or drawing indicating, to scale, the amount of surface space to be used
4. Description of food and drinks to be sold
5. A statement of agreement to hold harmless the city of Rockford and officers and employees of the City of ran loss or damage
6. For alcohol sales: Certified public accountant or public accountant statement including documentation and or records, indicating that at least 40% of gross receipts were derived from food sales except in Festival Zone areas
7. A written plan detailing compliance with conditions hereby established for operating a sidewalk café.
8. A policy of liability insurance in the minimum amount of three hundred thousand dollars ($300,000) and a one hundred thousand dollar ($100,000) property damage policy naming the City of Rockford as an additional insured, in force at all times.

Certificate of Insurance Attached: _____Yes _____No Dated: _____

I, the undersigned, thoroughly understand that this is solely an application to operate a business, and is not permitted to operate a business until all applicable ordinances of the City of Rockford including but not limited to Building, Zoning and Fire regulations, have been fully complied with, and this application is properly signed by the departments listed below, and an official license is issued by the Comptroller.

Signature: _____ Dated_____

FOR OFFICE USE ONLY:

Date application received:_____ Received By:_____

$75 license fee attached YES/NO Final Action due_____(21 days from receipt)

Zoning: Approved/Disapproved by:_____Date; _____

Building: Approved/Disapproved by:_____Date; _____

Fire: Approved/Disapproved by:_____Date; _____

PW: Approved/Disapproved by: _____ Date: _____

Finance: Final Action: (check one) _____Approved and issued on_____by:_____ License # _____ Returned as incomplete on:_____by:_____

(with written explanation seven days from receipt)

_____Denied in writing on _____by:_____

AGREEMENT

In consideration for being issued a permit to operate a sidewalk café as that term is defined in the Rockford Code of Ordinances as they now exist or may hereafter be amended, the undersigned as a duly authorized agent for the business to whom said permit is being granted, agrees, both for himself and on behalf of said business, to indemnify, defend and otherwise hold harmless the City of Rockford and its employees, b any and all persons for any injury or claim arising out of the creation, existence or operation of or any activity in any way related to the creation, existence, or operation of the sidewalk café for which said permit is issued.

The undersigned further agrees both for himself and the business to whom said permit is issued, to indemnify, defend and otherwise hold harmless the City of Rockford and its employees, against any and all claims, damages and liabilities which may be asserted against the City of any of its employees, by and all persons in connection with any claim or injury arising from the condition of any public property which composes or is adjacent to any public property which composes part or all of the area, to be used or otherwise occupied, for the purpose of operating a sidewalk café pursuant to said permit.

Business: _____

By: _____

SUBSCRIBED and SWORN to before me this _____day of _____, 20____.

_____

NOTARY PUBLIC

My Commission Expires: _____