

TEMPORARY

Outdoor Dining Application

Town of Derry, New Hampshire

Office of the Town Administrator

14 Manning Street, 3rd Floor

Derry, NH 03038

www.derrynh.org

Please send completed application to Beverly Donovan, Economic Development Director at Beverlydonovan@derrynh.org. Call (603) 845-5407 with any questions.

Please complete the following application and submit it to Town Administrator. This is a temporary outdoor dining license that will be good through **June 30, 2020** or longer with approval from the Town Administrator. All outdoor dining must abide by the State of NH Governor's order and the Town of Derry's Tent Inspection Checklist (if applicable); the Town has the right to revoke any temporary license at any time for non-compliance. Please note, this is a temporary license due to the current COVID-19 situation, upon elimination of this temporary license all restaurants will need to re-apply for the normal outdoor dining license and pay all licensing fees. Please see the requirements at <https://www.governor.nh.gov/news-media/stay-at-home/documents/20200501-restaurants.pdf>

Address of proposed Outdoor Dining Area ("Area"): _____

Applicant: _____

Address (Street/City/State/Zip):

Phone number(s):

Email:

Property Owner:

Address (Street/City/State/Zip):

Phone number(s): _____

Please provide the following:

- A dimensioned site plan is attached to this Application depicting the following: the existing conditions, including a depiction of public infrastructure such as curb lines, light poles, bike racks, street trees, tree grates, manhole covers, meters, licensed A-frame signs, adjacent on-street parking and loading zones, adjacent accessible sidewalk curb cuts and the like, the proposed table/chair layout plan for outdoor dining dimensioned routes of travel within the outdoor dining area and on the adjoining public sidewalk, as well as detail sheets for the proposed enclosure system, tables, chairs, trash receptacles, and the like. If outdoor sanitary facilities are to be used, please note the location on the site plan.
- Include all existing lighting for the proposed dining area on the above dimensioned site plan. The amount of lighting will help staff determine the hours of operation for safely conducting business outside.
- Copy of license from New Hampshire Liquor Commission if applicant intends to serve alcohol.
- If using private property, include an email/signed letter from the property owner giving you permission to use their property. Please include all special requirements set forth by said property owner including certificate of insurance naming them as an additionally insured.
- You will need to contact the State of NH Liquor Commission via email to let them know you will be “serving alcohol and food outdoors in compliance with the Governor’s Orders”. Email: reopen@liquor.nh.gov you should receive an automatic response, please keep that email and send in with your application.
- In the case of locations on public property, proof of liability insurance of at least \$1,000,000 listing the Town of Derry, and its employees, officials, agents, and volunteers as an additional insured.
- If use of a tent is contemplated on private property, the applicant must comply with appropriate Life Safety Codes and NH Fire Code Regulations to receive the Place of Assembly Permit. Use of a tent in public rights of way are not permitted. See: [Tent Inspection Checklist](#)

I/We _____, (owner/s) of _____(restaurant name) will abide by the Town of Derry's outdoor dining ordinance and the most recent Governor's Order, dated May 1, 2020, set forth by the State of NH regarding outdoor dining. I/We understand the failure to do so could result in revocation of my temporary outdoor dining approval.

All restaurants will continue to follow the 2017 food code regulations.

Application must be complete to be considered. All questions must be answered, and all applicable check boxes must be checked. Failure to do so shall result in an incomplete application which will not be processed. The undersigned attests that the supplied information is accurate and complete and requests that the Town Administrator proceed with processing this application under the requirements of the Town of Derry.

Applicant Signature

Applicant Signature

Date

Date

TOWN OF DERRY USE ONLY

OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE

Staff Review and sign off:

- | | |
|--|---|
| <input type="checkbox"/> Police Department: _____ | <input type="checkbox"/> Fire Department: _____ |
| <input type="checkbox"/> Planning Department: _____ | <input type="checkbox"/> Public Works: _____ |
| <input type="checkbox"/> Health Officer: _____ | <input type="checkbox"/> Economic Development: _____ |

THIS LICENSE IS ISSUED with the following conditions DENIED for the following reason(s)

Permit Expiration Date:

Approved By: _____ Date: _____
David Caron, Town Administrator