

City Use
Date Received:
Approved:

City of Vermillion

Remit to:
 City Administration
 City Hall
 25 Center St.
 Vermillion, SD 57069
 (605) 677-7050

Application for Furniture Zone Use Permit

I, _____ as Owner Partner Officer for and in behalf of
 (FIRST NAME, MIDDLE, AND LAST)

_____ hereby make application for use of the public sidewalks at
 (INDIVIDUAL OR BUSINESS TRADE NAME)

_____ pursuant to Chapter 96 of the Revised Ordinances of Vermillion, SD.
 (REQUESTED LOCATION)

Business Address:	Business Phone Number:	Business/Trade Name:
	Business Email:	Legal Name of Entity:
Owner/Partner Name/Contact Information:		
Owner/Partner Name/Contact Information:		

Do you hold a license to serve on-sale alcohol and intend to serve it on the sidewalk?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you hold a license to serve food and intend to serve it on the sidewalk?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you acknowledge receipt of and agree to the provisions of the furniture zone? (see attached)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you agree that violating the provisions of the furniture zone may lead to suspension/revocation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

What types of fixtures (furniture, etc.) do you plan to use in your furniture zone?		
Item(s)	Number	Description/Shape/Size
Tables		
Chairs		
Planters		
Rope Stanchions/Bollards		
Menu Sign/Stand		
Other (specify)		

Required submissions (please attach):

- A description and schematic drawing showing the dimensions of the site and the typical placement of all objects on an 8.5" x 11" sheet.
 - Show dimensions of site and adjacent building
 - Show all objects listed above
 - Show existing objects.
 - Show delineation of site.
- Proof of required insurance.
- Payment of \$35 permit/application fee.
- Crowd Management Plan (for alcohol)
- Additional submissions as required.

<p>Statement of Application and Hold Harmless. I, _____ state that I, the above-named applicant, have filled out this application for permission to use the public right-of-way in the Vermillion Central Business District, and that the contents of the application and all other information supplied by me is true to the best of my knowledge, information, or belief. I agree to comply with all City Ordinances relevant to the proposed furniture zone used. I agree to assume all responsibility and liability for the use of the public right-of-way granted by this permit, and further agree to hold harmless the City of Vermillion, its employees or agents from any and all incidents or claims that may arise from use of the public-right-of-way. I also understand that the City of Vermillion may approve this permit conditionally and modify the conditions by giving written notice to me at any time in accordance with City Ordinances.</p>		
<p>_____</p> <p>Print Name</p>	<p>_____</p> <p>Applicant's Signature</p>	<p>_____</p> <p>Date</p>