



TOWN OF THE BLUE MOUNTAINS

BUILDING & BY-LAW SERVICES

32 Mill Street, Box 310 THORNBURY, ON N0H 2P0

Telephone: (519) 599-3131 Fax: (519) 599-7723

Toll Free: 1-888-258-6867 www.thebluemountains.ca

SIDEWALK PATIO/ CAFÉ APPLICATION FORM [By-law 2004-34]:

Application Date: ____/____/____ M/D/Y	Assessment Roll No.: _____	Licence Application No.: _____ - _____	[Office Use Only]
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Civic Address: _____

Business Name: _____	Unit No.: _____	Fire/911 #: _____	Legal Description: _____
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Number of Tables: _____	Number of Seats: _____	Area to be Occupied (Sq. Feet or Metres): _____	Is it intended that the patio/café will be licenced by the Alcohol and Gaming Commission? <input type="checkbox"/> Yes <input type="checkbox"/> No
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OWNER:	Phone #:
	Facsimile #:
Mailing Address:	Email:
City/Town:	Prov/P Code:
APPLICANT:	Phone #:
	Facsimile #:
Address:	Email:
City/Town:	Prov/P Code:
DESIGNER:	Phone #:
	Facsimile #:
Address:	Email:
City/Town:	Prov/P Code:

The undersigned hereby applies for a Patio/Café Licence in accordance with Town By-law No. 2004-34 and having read and understood the provisions of said By-law.

DECLARATION

I, the undersigned, _____, am the authorized owner/agent of the owner named in the above application and I certify the truth of all the statements or representations contained therein.

I understand that the issuance of a Patio/Café Licence shall not be deemed to be a waiver of any of the provisions of Town By-law No. 2004-34 or any other applicable law notwithstanding anything included or omitted from the plans or other material filed in support of or in connection with the above application.

I acknowledge that in the event a Licence is issued, any non-compliance with specific By-law provisions and/or conditions, plan, specifications, etc. proposed in the above application is prohibited and such could result in the Licence being revoked.

I further acknowledge that in the event that the Licence is revoked for any cause or irregularity or non-conformity with the by-laws or requirements of the municipality, there shall be no right of claim whatsoever against the municipal corporation or any official, employee or agent thereof and any such claim is hereby expressly waived.

Dated the _____ day of _____, 20_____.

Signature of Owner/Authorized Agent: _____

Witness: _____



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LETTER OF ACKNOWLEDGEMENT (Sidewalk Patio/Café Application – By-Law 2004-34)

DATE: _____

TO: The Blue Mountains
32 Mill Street, P.O. Box 310
Thornbury, ON N0H 2P0
Attention: Greg Miller, CBO & Manager, Building & By-law Services

RE: Town By-law No. 2004-34
Town of The Blue Mountains

BUSINESS NAME: _____

OWNER: _____

(Hereinafter known as the "Owner")

ADDRESS/LOCATION: _____

I, the undersigned, hereby acknowledge that I have received a copy of Town By-law No. 2004-34 ("Sidewalk Use By-law") and have read and understood the provisions of said By-law.

(Signature) _____ (Print Name) _____

(Note: This Acknowledgement is part of the Sidewalk Patio/Café Application. The application is considered incomplete without the submission of a completed Letter of Acknowledgement.)



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LETTER OF INDEMNIFICATION (Sidewalk Patio/Café Application – By-Law 2004-34)

DATE: _____

TO: The Blue Mountains
32 Mill Street, P.O. Box 310
Thornbury, ON N0H 2P0
Attention: Greg Miller, CBO & Manager, Building & By-law Services

RE: Proposed Patio/Café
Town of The Blue Mountains

BUSINESS NAME: _____

OWNER: _____

(Hereinafter known as the “Owner”)

ADDRESS/LOCATION: _____

The Owner hereby agrees that it will at all times hereafter, well and truly save, keep harmless and fully indemnify the Corporation of the Town of The Blue Mountains (the “Town”) and the Corporation of the County of Grey (the “County”) and their successors and assigns, from and against all actions, claims and demands whatsoever which may be brought against or made upon the Town and/or the County related to the establishment and/or operation of the Patio/Café.

Further, the Owner hereby agrees that it will at all times hereafter, well and truly save, keep against all loss, liability, judgments, claims, costs, demands or expenses which the Town and/or County may sustain, suffer or be put to resulting from or arising out of the failure of the Owner, its agents or employees or any of them, to exercise reasonable care, skill or diligence in the performance or rendering of any work or service performed or rendered related to the operation of the Patio/Café.

(Signature) _____ (Print Name) _____

I have authority to bind the Corporation
Corporate Seal (if applicable)

(Note: This Indemnification is part of the Sidewalk Patio/Café Application. The application is considered incomplete without the submission of a completed Letter of Indemnification.)