



Town of Wilbraham
 240 Springfield Street
 Wilbraham, Massachusetts 01095
 413-596-2800 www.wilbraham-ma.gov

APPLICATION FOR TEMPORARY OUTDOOR SEATING/ALTERATION OF PREMISES

PLEASE READ BEFORE FILLING OUT THIS APPLICATION: As Massachusetts re-opens the economy, many restaurants will be seeking to temporarily add or expand existing outdoor seating. In an effort to make this process easier for Wilbraham’s restaurants, the Town has developed the following guidance which includes the minimum requirements from all relevant Town departments. Additionally, **the Town has streamlined the process and any usual Town application and permit fees related to these changes will be waived.** The Commonwealth of Massachusetts will be publishing guidance and updates throughout the re-opening process (www.mass.gov). All State requirements must be met, as they cannot be waived or reduced by the Town.

ESTABLISHMENT INFORMATION	
(Business Name) _____	(DBA) _____
(Business Address) _____	(Contact Phone Number) _____
(Contact Name) _____	(E-mail Address) _____
Manager (if applicable, name on ABCC license): _____	
Signature: _____	Date: _____

PROPOSED DESCRIPTION OF PREMISES

Please provide a complete description of proposed alteration of premises, including approximate square footage, number of tables/seats and tents/umbrellas. You must also submit a proposed sketch (hand drawn in ink) for the outdoor seating arrangement on the attached page or a separate sheet.

Description of proposed Outdoor Dining Plan (Note: All proposals MUST BE ADA compliant):

Approximate Outdoor Square Footage _____	
Proposed Outdoor Seating YES NO (Cannot exceed permitted indoor capacity)	Seating Capacity of Expansion: _____ Maximum Capacity of Expansion: _____
Is the proposed outdoor seating area on private property?	YES NO
If Yes: The owner of the private property must provide written consent – See Affidavit of Ownership form on website, OR submit a signed letter from the property owner.	
Is the proposed outdoor seating area in the public right of way?	YES NO
Will you be installing a fence/barrier? YES NO (Required for alcohol sales)	
What type of fencing/barriers will be used around the proposed outdoor premises: _____	
Will you be installing a tent(s)? YES NO (Tent permit may be required)	
How many tents will you be installing? _____	
What are the dimensions of the tent(s)? _____	
Will the tents have side curtains? YES NO	

LIQUOR LICENSE

Note that the outdoor area must comply with the 2015 ABCC Advisory on Patios and Outdoor Seating

Do you hold a Liquor License? YES NO	Liquor License # _____
Does the proposed outdoor seating have a person to oversee the exit/entry point and can the outdoor seating be seen from the interior of the premises for management personnel for monitoring?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

SKETCH OF PROPOSED OUTDOOR SEATING

This sketch must include:

1. Number of tables and seats
2. Any adjustment to parking
3. Tents and barriers
4. Arrows showing customer traffic flow

ADDITIONAL DOCUMENTS

Written Permission from land owner of property as needed
Certificate of Insurance for extended business service (as needed for tenants)
Tent permits (Building Department)
Proposed signage

This Application is in response to the June 1, 2020 Order Governor Charlie Baker issued regarding reopening establishments for outdoor table service only. Indoor service will remain prohibited until further order by the Governor. Please be aware that all expanded premises approved pursuant to this order are only effective through November 1, 2020 or until the Order is rescinded, whichever is sooner *and revert to your original licensed premises*.

Massachusetts Restaurant COVID-19 Safety Standards, COVID-19 Checklist, and other helpful website links are available on the Town website as a resource to help you.

Acknowledgement: Approval of the expanded licensed premises will expire November 1, 2020, or when the Governor's order is rescinded, whichever is sooner.

Signature of Applicant

Date

Submit completed applications to: hkmelius@wilbraham-ma.gov

For Town of Wilbraham Use Only			
Approved by:			
Health Inspector:	Building Inspector:	Fire Department:	Police Department:
Board of Selectman/ Town Administrator:	ADA Compliance:	ADA Compliance:	