



CITY OF WYANDOTTE OUTDOOR CAFÉ APPLICATION

Engineering and Building
3200 Biddle Avenue
Wyandotte, MI 48192

Date: _____

REQUIRED INFORMATION:

Address of Outdoor Café: _____

Name of Business: _____

Property Owner: _____

Address: _____ City: _____ State _____ Zip Code _____

Phone Number: (____) _____ Fax: (____) _____ Email: _____

Applicant: _____

Address: _____ City: _____ State _____ Zip Code _____

Phone Number: (____) _____ Fax: (____) _____ Email: _____

Zoning of property _____ Outdoor Café Location: ___Public Property ___ Private Property

Hours of occupancy for Outdoor Cafe: _____ AM thru _____ PM
(Sec. 2202.S.17:00 a.m. to 12 midnight Monday thru Sunday with extended hours to 2:00 a.m. on 3rd Fridays, Street Art Fair and events approved by Resolution by City Council.)

Dates of occupancy for Outdoor Café: From: _____ to _____
(Sec. 2202.S. 1 - Dates Allowed 3/15 to 11/15)

Area of occupancy in square feet: _____ sq ft; dimensions _____ x _____

Capacity of existing establishment: _____ people (with seating) _____ people (without seating)

Capacity of proposed outdoor café: _____ people (total number of seats)

Will alcoholic beverages be served at the outdoor café: _____ Yes _____ No

DIAGRAM OF SIDEWALK CAFÉ:

Please attach a separate 8-1/2" x 11" sheet (or larger) illustrating the proposed café area. Show existing sidewalk, buildings, curb, existing improvements in the right-of-way, i.e. lamp posts, street trees, planters, awnings, and guards, benches, mailboxes, etc., an unobstructed clear area for pedestrian passage along sidewalk (a minimum of 60" wide), railings, umbrellas, proposed area for tables and chairs, number of tables and chairs, and details of the proposed perimeter barrier. Diagram should be of a scale 1" = 10' (or other appropriate scale).

Location of entrances and exits shall be shown.

Attach a copy of all furnishings i.e. tables, chairs, planters containing plants and accessories. Furnishings may not be attached.

Fences abutting public right-of-way must be black metal.

DIAGRAM OF SIDEWALK CAFÉ:

Cafes adjacent to residential properties or that share an alley with residential properties shall be screened with a solid fence at minimum of six (6) feet in height.

For additional requirements, please refer to the Zoning Ordinance and the Outdoor Café Ordinance pertaining to the zoning of the property.

INSURANCE FOR OUTDOOR CAFES ON PUBLIC PROPERTY:

For outdoor cafes on public property, Liability Insurance, Liquor Liability Coverage and Property Damage Coverage naming the City of Wyandotte and Wayne County (when applicable) as an insured party must be provided before an outdoor café may be set up and be maintained for as long as the outdoor café is in operation. See attached example of a Certificate of Insurance for minimum coverages and minimum limits required. A primary general liability policy with limit of \$2 million per occurrence with a \$4 million aggregate policy is acceptable in lieu of the \$1 million per occurrence with a \$2 million aggregate policy plus the \$1 million umbrella as shown on the sample certificate provided.

NOTE: For those cafes on public property that serve alcohol you will also be required to have liquor liability coverage in the amount of \$1 million per occurrence and \$1 million policy aggregate.

GRANT OF LICENSE/HOLD HARMLESS AGREEMENT FOR OUTDOOR CAFES ON PUBLIC PROPERTY:

A Grant of License and Hold Harmless Agreement will be required to be executed by the property owner and tenant if applicable. The Grant of License and Hold Harmless Agreement will be prepared by the City's Attorney and require approval by the City Council.

ANNUAL INSPECTON:

An Annual Inspection will be required. The Applicant shall apply to the Engineering and Building Department each year after receiving approval by the Planning Commission.

CERTIFICATION:

Applicant covenants and agrees to strictly comply with all terms and conditions of the Outdoor Café Ordinance, all other ordinances and requirements of State and Federal laws. Applicant further understands and agrees that the Planning Commission in its sole and absolute discretion, may approve, deny or set any conditions or limitations on any outdoor café which may be approved on private property. In addition, the City Council in its sole and absolute discretion may approve, deny or set any conditions or limitations on any outdoor café which may be approved on public property.

Approval of an outdoor café is on a calendar year basis and a renewal request must be filed each year. Approval of an outdoor café is subject to revocation by the City.

INDEMNIFICATION:

By signing this Application and upon approval by the Planning Commission for cafes on private property or upon approval by the City council for cafes on public property, the Applicant agrees to indemnify the City of Wyandotte per the following: the applicant and permittee shall indemnify, hold harmless and defend the City of Wyandotte and Wayne County, and their agents, employees elected officials, against and any all claims, expenses (including attorney's fees) demands, payments, suits, actions, recoveries, and judgements of every name and description, brought or recovered against them or either or any of them for or on account of loss

of life, any personal injury, or damages to property received or sustained by any person or persons whomsoever by reason of any act or omission of the said applicant and permittee, their agents, servants, or subcontractors in the operation of said outdoor café, or by or in consequence of any negligence or carelessness in connection with the same or on account of the death of or injuries to persons who shall be engaged in the operation of the outdoor café; and on account of liability or obligation imposed directly or indirectly upon the City of Wyandotte or Wayne County by reason of any law of the State of Michigan or the United States, now existing or which shall hereafter be enacted imposing any liability or obligation, or providing for compensation to any person or persons on account of or arising from the date hereof, for injuries to employees or others. Said applicant and permittee shall pay, settle, compromise, and procure the discharge of any and all such claims and all such losses, damages, expenses, liabilities, and obligations, of any and all such claims and all such losses, damages, expenses, liabilities, and obligations, and shall defend at his own cost and expense any and all claims, demands, suits, and actions made or brought against the City of Wyandotte and Wayne County for or upon any such claim. In case the said applicant and permittee shall fail, neglect, or refuse to comply with any of the provisions of this paragraph, said City of Wyandotte or Wayne County may in order to protect itself from liability, defend any such claim, demand, suits, or action and pay, settle, compromise, and procure the discharge thereof, in which case the said applicant and permittee shall repay to the City of Wyandotte or Wayne County any and all such loss, damage, and expense, including attorney's fees paid, suffered, or incurred by said City of Wyandotte or Wayne County in so doing.

Applicant and permittee shall defend, hold harmless and indemnify City of Wyandotte and Wayne County against any and all claims, expense (including attorney's fees), loss or liability for injury to or death of any persons (including employees or agents), and loss of or damage to any property (including property owned, leased or borrowed by City of Wyandotte or Wayne County), incurred during the operating of the outdoor café associated with and under this agreement, unless any of the above stated claims, expenses, loss, liability or obligation is caused solely by the negligence of the City of Wyandotte or Wayne County. Applicant and Permittee shall waive all of its and all of its Insurers rights of subrogation against the City of Wyandotte, and Wayne County, as well all of their Officers, Employees, Elected Officials and Volunteers.

FEE PAID: _____

Dated this _____ day of _____, 2_____

Applicant's Signature: _____

 Print Name and Title

Office Use Only	
FEE: _____	\$300 with no alcohol served \$750 with alcohol served
	Notes: _____
Public Department Approval: ___ Yes ___ No	Date: _____, 20_____
Fire Department Approval: ___ Yes ___ No	Date: _____, 20_____
Eng/Bldg. Department Approval: ___ Yes ___ No	Date: _____, 20_____
Insurance Certification on File: ___ Yes ___ No	Date: _____, 20_____
Hold Harmless Agreement Executed: ___ Yes ___ No	Date: _____, 20_____



EXAMPLE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME:		
	PHONE (A/C, No, Ext):	FAX (A/C, No):	
INSURED	E-MAIL ADDRESS:		
	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A :		
	INSURER B :		
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

COVERAGES CERTIFICATE NUMBER: CL172912595 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Sewer Backup-negligence \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION S <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE						EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
ALSO REQUIRED \$1M LIQUOR LIABILITY							

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The City of Wyandotte, its officers and employees are additional insureds. The coverage is primary and not contributing or pro rata with any other insurance or similar protection (e.g. risk management association) which is or may not be available to or carried by the City. This coverage extends to the sidewalk patio area where ongoing restaurant operations take place.
The insured hereby waives its and all of its Insurers rights of subrogation against the City of Wyandotte, Wayne County, Its Officers, Employees, Elected Officials and Volunteers.

CERTIFICATE HOLDER	CANCELLATION
City of Wyandotte 3200 Biddle Ave. Wyandotte, MI 48192	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE