



# BOISE CITY

## SIDEWALK CAFÉ LICENSE APPLICATION

### OFFICE USE ONLY

DATE ISSUED \_\_\_\_\_

CITY LICENSE # \_\_\_\_\_

LIABILITY INSURANCE (minimum \$500,000)

DETAILED SCALE DRAWING  
OR PREMISE MAP APPROVED BY A.B.C

BOISE CITY EATING & DRINKING LICENSE (copy)

BOISE CITY ALCOHOL BEVERAGE LICENSE (copy)  
(if alcohol will be served)

ALCOHOL BEVERAGE SIGN (copy)

#### ALL FEES ARE NON REFUNDABLE:

LICENSE ..... \$ 97.50

PROCESSING ..... \$ 1.50

TOTAL FEES DUE ..... \_\_\_\_\_

### ••• LICENSE EXPIRES ANNUALLY ON DECEMBER 31ST •••

All applications must be accompanied by: 1) **Comprehensive General Liability Insurance** policy (minimum \$500,000) naming the **City of Boise** as **Additional Named Insured**. 2) **Detailed scale drawing of the Sidewalk Café area or premise map approved by A.B.C.** 3) Copy of current **Boise City Eating and Drinking license**. 4) Copy of current **Boise City Alcohol Beverage License** (if applicable). 5) Copy of **Alcohol Beverage Sign** (if Applicable).

### WAIVER OF PROCEDURAL RIGHTS

If the first intended date of operation is less than thirty (30) days from the date of application, the following must be signed.

I acknowledge that I have filed this application with the City Clerk's Office less than thirty (30) days prior to the intended operation of this Sidewalk Café. I hereby agree that if this application is not approved, no action or inaction by the Boise City Clerk, Police or City Council may be appealed or contested, and I agree it shall be final and binding on me, my representatives, associates and successors in interest.

\_\_\_\_\_

Signature of Applicant

\_\_\_\_\_

Date

BOISE CITY CODE 5-06-04

BUSINESS NAME \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_

PREMISE LOCATION \_\_\_\_\_ BOISE IDAHO  
Street City State Zip

MAILING ADDRESS \_\_\_\_\_  
Street City State Zip

MANAGER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
First Middle Last

DATES OF OPERATION \_\_\_\_\_ HOURS OF OPERATION \_\_\_\_\_

NAME OF APPLICANT \_\_\_\_\_ PHONE \_\_\_\_\_  
First Middle Last

RESIDENCE ADDRESS \_\_\_\_\_  
Street City State Zip

EMAIL ADDRESS \_\_\_\_\_

OVER

OWNER OF SIDEWALK PROPERTY:     APPLICANT     ACHD (Ada County Highway District)     \*OTHER

\* If the sidewalk area sought to be permitted is not owned by the applicant or ACHD, then a certified copy of the document showing that the owner of the sidewalk area consents to the sale of food and/or beverages on such sidewalk(s) is required with this application.

## INDEMNIFICATION AGREEMENT - BOISE CITY SIDEWALK CAFÉ LICENSE

\_\_\_\_\_, shall indemnify and save and hold harmless the City of Boise from  
VENDOR/BUSINESS NAME  
and for any and all losses, claims, actions, judgements for damages or injury to persons and property and losses and expenses caused or incurred by \_\_\_\_\_, its servants, agents, employees, guests and business invitees, and not caused by or arising out of the tortious conduct of the City of Boise or its employees.  
VENDOR/BUSINESS NAME  
In addition, \_\_\_\_\_ shall maintain, and specifically agree that it will maintain, throughout the term of this agreement, liability insurance, in which the City of Boise shall be named as additional insured in the minimum amount of five hundred thousand dollars (\$500,000). The limits of the insurance shall not be deemed a limitation if the covenants to indemnify and save and hold harmless the City of Boise, and if the City of Boise becomes liable for an amount in excess of the insurance limits, herein provided, \_\_\_\_\_  
VENDOR/BUSINESS NAME  
covenants and agrees to indemnify and save and hold harmless the City of Boise from and for all such losses, claims, actions or judgements for damages or liability to persons or property. \_\_\_\_\_  
VENDOR/BUSINESS NAME  
shall provide the City of Boise with a Certificate of Insurance, or other proof of insurance evidencing \_\_\_\_\_  
VENDOR/BUSINESS NAME  
compliance with the requirements of this paragraph and file such proof of insurance with the City of Boise.

I, the applicant, agree that all exits are to be monitored and alcohol is to be served by waiters or waitresses only to seated customers. It is understood that if a customer leaves the Sidewalk Café area with an opened container that the permit to operate this Sidewalk Café may be suspended or revoked.

\_\_\_\_\_  
PRINTED NAME OF APPLICANT

\_\_\_\_\_  
SIGNATURE OF APPLICANT

## STATEMENT OF OATH

I swear and affirm, under penalty of perjury pursuant to Title 18, Chapter 54 Idaho Code, that the statements contained in the above application for a Sidewalk Café License are true and correct to the best of my knowledge.

\_\_\_\_\_  
Date \_\_\_\_\_  
SIGNATURE OF APPLICANT

STATE OF IDAHO

> SS

COUNTY OF ADA

On this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_, before me the undersigned, a Notary Public, personally appeared \_\_\_\_\_ known or identified to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he / she executed the same.

\_\_\_\_\_  
NOTARY PUBLIC FOR IDAHO

RESIDING AT \_\_\_\_\_, IDAHO

MY COMMISSION EXPIRES \_\_\_\_\_

BUSINESS NAME \_\_\_\_\_

PREMISE LOCATION \_\_\_\_\_  
Street City State Zip

BOISE

IDAHO

**Detailed scale drawing of Sidewalk Café area** (include placement of tables, chairs, planters, canopies, umbrellas, etc.) If needed, please attach additional page(s).

### SIDEWALK CAFÉ APPLICATION REVIEW

#### Office Use Only

**New** applications will be reviewed by the following departments. **Renewal** applications will be reviewed if there are proposed changes to the premise, furniture or fixtures.

	Date	Approved	Denied (Attach reason for denial)	Signature
Fire	_____	_____	_____	_____
Police	_____	_____	_____	_____
PDS	_____	_____	_____	_____
Historic Design Review	_____	_____	_____	_____
ACHD	_____	_____	_____	_____