

Steven T. Noble  
Mayor

Stephan Knox  
Director

**CITY OF KINGSTON**  
**Building Safety & Zoning Enforcement**

5 Garraghan Drive  
Kingston, NY 12401  
Phone (845) 331-1217  
Fax (845) 331-1224



**Sidewalk Café / Street Outdoor Seating Permit Application**

The following items must be submitted with this application:

- Non-refundable application fee of \$150.00. If approved, \$350 license fee is also required for **Street Outdoor Seating Permit** or Non-refundable application/permit fee of \$10.00 for **Sidewalk Café Permit**.
- Signed and Notarized Acknowledgement.
- Signed and Notarized Agreement to Indemnify and Hold Harmless.
- Copy of New York State Liquor License, if you plan to serve alcohol.
- Scaled site plan of sidewalk café or street outdoor seating layout to include; number of proposed tables, linear square footage of proposed outdoor café, design and location of all temporary structures such as awnings, planters, landscaping, tables, chairs, umbrellas, wheel stops, barriers and other equipment. Location and distances from street corners and all permanent fixtures such as street signs, trees, fire hydrants, etc. Lighting and electrical outlet locations must also be noted. Americans with Disabilities Act (ADA) guidelines must be complied with.
- Detailed drawings of any structural components including but not limited to; platforms, temporary or seasonal awnings or covers, etc. Any roof structure must be designed and stamped by a New York State Licensed Design Professional; plans must be submitted with application. Design must provide details of uplift resistance requirements per NYS code.
- Certificate of insurance demonstrating a satisfactory amount of public liability, property and workers' compensation insurance as set forth in Schedule A and naming the City as coinsured. Schedule A is on file in the City Clerk's office.
- Written consent of neighboring property owner(s) and tenant(s) if outdoor dining area extends onto or a neighboring property.

**Please complete the following pages.**

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Restaurant/Cafe Name: \_\_\_\_\_

Restaurant/Café Address: \_\_\_\_\_

Restaurant/Cafe Owner:  
\_\_\_\_\_

Address:  
\_\_\_\_\_

Phone: Email: \_\_\_\_\_

Property Owner:  
\_\_\_\_\_

Address:  
\_\_\_\_\_

Phone (cell): Email: \_\_\_\_\_  
Manager/Contact: \_\_\_\_\_

\_\_\_\_\_

Phone (cell): \_\_\_\_\_ Email: \_\_\_\_\_

**Hours of Operation:**  
\_\_\_\_\_

**(All Sidewalk Cafés and Street Outdoor seating shall close operation by 10:00pm)**

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# CITY OF KINGSTON

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### Acknowledgement

I, \_\_\_\_\_, hereby apply for a permit from the City of Kingston to operate and manage a sidewalk café/outdoor seating at \_\_\_\_\_.

I certify that I have received a copy of Chapter 346 of the City Code and have reviewed said regulations governing the operation of sidewalk cafés and outdoor seating in the City of Kingston, New York. I hereby agree to fully comply with all the rules and regulations set forth. I understand that the sidewalk café/outdoor seating permit may be revoked at any time if I fail to abide by the parameters of the adopted legislation.

**Signature of Applicant:** \_\_\_\_\_

**Print Name of Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### Agreement to Indemnify and Hold Harmless

I, \_\_\_\_\_, hereby agree to indemnify and hold harmless the City of Kingston, its officers and employees against any loss or liability or damage, including expenses and costs for bodily injury, and for property damage sustained by any person as a result of my operation of a sidewalk café/outdoor seating.

**Signature of Applicant:** \_\_\_\_\_

**Name of Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

Notary Public

Steven T. Noble  
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**If the operator is proposing to extend sidewalk café/outdoor seating area onto or in front of neighboring property, written consent from each affected neighboring property owner and commercial tenant must be submitted with this application.**

**Please submit application and all supporting documents, with original signatures, to Kingston Building Safety and Zoning Enforcement located at 5 Garraghan Drive, Kingston, New York 12401.**

**Office Use Only:**

Date Application Received: \_\_\_\_\_

Approval Date: \_\_\_\_\_

Payment Received: \_\_\_\_\_

Denial Date: \_\_\_\_\_

Insurance Received/Filed: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

Liquor License Provided: \_\_\_\_\_

Decision By: \_\_\_\_\_

Site Plan Provided: \_\_\_\_\_

Site Visit Date: \_\_\_\_\_

Observations/Concerns: \_\_\_\_\_