BOROUGH OF SAYREVILLE

ZONING DEPARTMENT
49 DOLAN STREET * SAYREVILLE, NJ 08872
732-390-7004

NO FEE

COVID-19 SPECIAL EVENT TEMPORARY OUTDOOR RESTAURANT SEATING APPLICATION

Submit completed application including ATTACHMENTS via email to zoningofficer@sayreville.com or dropbox outside of 49 Dolan Street.

Name of Business: _____

Contact Person: _____

Address: _____

Phone: _____ Email: _____

Begin and End Date of Outdoor Seating: From: _____ To: _____/2021

Hours of Operation for Outdoor Seating Area: From: _____am/pm To: _____ am/pm

ATTACHMENT REQUIRED:

A sketch (superimposed upon an existing site plan drawing or survey, where available) of the proposed outdoor restaurant seating area (not to exceed 1200 sq ft) must be submitted with the application and include the following information:

- Location and size of all proposed tables and chairs
- Distances to other tables and chairs
- Distances from any other structures (such as a host podium and serving station)
- Location and size of all proposed tents, awning, and/or umbrellas

COMPLIANCE/REQUIREMENTS OVERVIEW:

- If within a parking lot, safety bollards or similar must be provided.
- Temporary lighting is required if the outdoor restaurant seating area is proposed to be utilized after dusk.
- All applicants are responsible for verifying that their liquor license permits the serving of alcohol outdoors.
- All businesses shall comply with all requirements established by any and all Executive Orders issued by the Governor, as well as, any other applicable State orders that specify social distancing requirements, applicable sanitary and cleaning standards, use of masks and partitions or other requirements, rules and/or regulations for temporary outdoor seating areas.
- The Borough shall have the discretion to create additional standards for a particular property and to fashion such conditions as may be necessary to further the purposes of the Borough Zoning Ordinance, as well as, the goals and objectives of the Borough's Master Plan.

By signing this application, you are acknowledging that you: 1) have the authority to submit this application on behalf of the business; 2) have permission from the property owner and/or landlord to conduct the activity/activities associated with this application; 3) agree to comply with all state and local laws, rules and regulations, including the terms and conditions of Resolution No. 2020-132, any and all applicable Executive Orders or Directives issued by the Governor of New Jersey or New Jersey Department of Health, as well as, any and all stipulations imposed by Borough of Sayreville departments and/or officials as a condition of approval of the application (if any).

_____ _____ _____

Owner Name – Printed Owner Signature Date

OFFICE USE ONLY

APPROVED:_____ _____

Zoning Officer Date Issued