



CITY OF COURTENAY  
 Planning Services  
 830 Cliffe Avenue  
 Courtenay, BC V9N 2J7  
 Tel: 250-334-4441 Fax: 250-334-4241  
 Email: planning@courtenay.ca

# SIDEWALK PATIO APPLICATION FORM

APPLICANT INFORMATION		DESCRIPTION OF PROPERTY
Business Name:		Civic Address:
Contact Name(s):		
Address:		
City:	Postal:	Legal Description:
Tel:	Fax:	
Email:		
<b>IF APPLICANT IS NOT THE OWNER OF THE PROPERTY</b>		
Registered Owner's Name(s):		Tel:
Address:		Email:
Registered Owner's Signature(s):		
<b>TYPE OF SIDEWALK PATIO (SELECT APPLICABLE FROM THE FOLLOWING. LAYOUT TYPES A, B AND C SERVE AS GUIDELINES. OTHER LAYOUTS MAY BE PERMITTED IF THE SIDEWALK PATIO POLICY GUIDELINES ARE MET)</b>		
<input type="checkbox"/>	TYPE A	A sidewalk patio that requires the use of the sidewalk area for the sidewalk patio
<input type="checkbox"/>	TYPE B	A sidewalk patio that requires the use of the parking area for the pedestrian walkway
<input type="checkbox"/>	TYPE C	A sidewalk patio that requires the use of the parking area for the sidewalk patio
<input type="checkbox"/>	OTHER	
REQUIRED SUBMISSIONS		
<b>INCOMPLETE APPLICATION FORMS AND SUBMISSIONS WILL BE RETURNED TO THE APPLICANT WITHOUT FURTHER REVIEW</b>		
<input type="checkbox"/>	Completed Application form including signatures of Applicant(s) and Registered Owner(s) of the property.	
<input type="checkbox"/>	Traffic Control plan – All sidewalk patio applications that occupy space in the road right of way are required to provide a traffic control plan (See Appendix 1).	

<input type="checkbox"/>	<p>Payment of licence of occupation fees in accordance with <i>Fees and Charges Bylaw No. 1673, 1992.</i></p> <p>\$125.00 Seasonal Licence Fee for April 1<sup>st</sup> to October 31<sup>st</sup> (to be paid at the time of application) or \$25.00 per month, plus:  \$5.00 per m<sup>2</sup> annually for sidewalk or SRW occupied;  \$100.00 per parking space occupied annually.</p>
<input type="checkbox"/>	<p>A letter of intent that provides an overview of the project and outlines the operating hours and days to which the outdoor seating area will be in operation.</p>
<input type="checkbox"/>	<p>Scaled drawings of the proposed outdoor seating area which includes the location of the proposed pedestrian walkway, number of tables and chairs on public sidewalks and/or parking stalls, access to the seating area, a description of all materials used in the seating area and pedestrian walkway, fencing (style and fence height) and the location of all patio amenities (e.g. flower baskets, planters, garbage containers).</p>
<input type="checkbox"/>	<p>Photographs of the building facade, parking areas, adjacent buildings (both sides, if applicable) all devices including fencing, railings, tables and chairs, umbrellas, and planters to be used.</p>
<input type="checkbox"/>	<p>A Copy of Certificate of Insurance (minimum liability \$5,000,000.00 The City shall be added as co-insured and must also include a 30-day written Notice of Cancellation Clause.</p>
<input type="checkbox"/>	<p>Copy of valid Business Licence.</p>
<input type="checkbox"/>	<p>Copy of valid Liquor Licence.</p>
<input type="checkbox"/>	<p>Written Permission from adjacent property owner(s) if patio seating area encroaches on an adjacent property.</p>
<b>APPLICANT'S SIGNATURE</b>	
<p><b>APPLICANT'S SIGNATURE:</b></p>	<p><b>DATE:</b></p>



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# SIDEWALK PATIO APPENDIX NO. 1

## TRAFFIC CONTROL PLAN

All sidewalk patio applications that occupy space in the road right of way are required to provide a traffic control plan. All applicants are advised to follow the attached instructional plan. If the patio installation requires modifications from the attached plan, applicants are required to provide a proposed modified traffic control plan.

## SCOPE OF WORK

Installation Date:

Work Time: (e.g. 9:00 AM – 10:00 AM)

Contractor's Contact Information  
Name: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

## TRAFFIC CONTROL PLAN

- I will be using a modified traffic control plan.  
 I will not be using a modified traffic control plan - include modified plan with application.

## APPLICANT'S SIGNATURE

APPLICANT'S SIGNATURE:

DATE:

