

Outdoor Dining Permit Applicant's Development Guide

Development Services Department – Planning & Zoning Division

City of Panama City, City Hall, 501 Harrison Avenue, 2nd Floor, Room 217, Panama City, FL 32401

Phone: 850-872-3025 | Email: planning@panamacity.gov | Website: www.panamacity.gov

Application Fee: \$200

Review Fee: N/A

Total Fee: \$200

All applications, materials, plans, documents and fees are required to be submitted electronically via the Development Services Department's online application portal. Submission via e-mail will not be considered. Ownership and Applicant Authorization Forms will also need to be submitted electronically.

All applications are to be filled out completely and correctly. Issuance of an outdoor dining permit shall allow for the use of outdoor dining associated fixtures such as tables, chairs, umbrellas, planters, bollards, railings, sandwich boards, and platforms within the public right-of-way (ROW) per the standards of this section. Other improvements not typical of an outdoor dining use shall be prohibited within the public ROW as determined by the Development Services Director. The application and materials will need to satisfy the requirements of Sec. 105-14, Outdoor dining, in the Unified Land Development Code.

ALL OF THE FOLLOWING CRITERIA MUST BE ANSWERED.

| Applicant Narrative | | |
|---|------------------------------|-----------------------------|
| Proposed Outdoor Dining Permit: | | |
| 1. Total square footage of existing business: | | |
| 2. Existing number of requested outdoor: | | |
| <input type="checkbox"/> Tables: <input type="checkbox"/> Chairs: | | |
| 3. Will the tables and chairs to be located on the sidewalk be: | | |
| In addition to existing indoor tables and chairs? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| A relocation of existing indoor tables and chairs to the outside? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Remaining on sidewalk after closing? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

| List of Requirements | Applicant Verification | Staff Verification |
|---|-------------------------------|---------------------------|
| Completed Outdoor Dining application form | | |
| A photocopy of your completed State of Florida beverage application form (if applicable); | | |
| A scale drawing on the site plan, showing the: | | |
| • Relationship of outdoor dining area to adjacent building and their uses and entrance locations; | | |
| • Location of the outdoor dining area and any utilities that might affect or be affected by the proposal along with setbacks; | | |
| • Height of dividers; height of plants if planters are being used as dividers; | | |
| • Existing and proposed pedestrian circulation pattern demonstrating a clear path for pedestrians; | | |
| • Total square footage and exact dimensions of the proposed outdoor dining area; | | |
| • Address and legal description of the building where subject restaurant is located; | | |
| • Proposed use, materials, colors and design of tables, chairs, umbrellas and other objects. | | |
| Property owner's written consent to applicant's application. | | |

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| If located in front of adjacent properties, letters of consent will be required from those property and business owners. | | |
| Height and dimensions and placement of sidewalk signs along with proposed materials. | | |
| If approved, the following information will be required before a permit can be issued: | | |
| <ul style="list-style-type: none"> • Copy of valid City Business Tax Receipt(s); • Executed Certificates of Insurance and worker's compensation, which must be approved by the City's Risk Management Officer; • Copy of liquor license covering the outdoor dining area (if applicable); • Copy of flame spread rating for awnings, umbrellas and similar fixtures; • Executed Release, Indemnification, and Hold Harmless Agreement • Copy of the Extension of Premises issued by the State of Florida ABT for alcohol. | | |

| Insurance Requirements | Applicant Verification | Staff Verification |
|--|------------------------|--------------------|
| Executed Certificate of Insurance with the City of Panama City listed as additional insured; | | |
| Executed Release and Indemnification Agreement. | | |