

DEPARTMENT OF BUILDINGS

APPLICATION FOR CERTIFICATE OF USE FOR SIDEWALK CAFÉ IN PUBLIC SPACE

			Date:	
CU CERTIFICATE OF USE				
APPLICATION MUST BE COMPLETED IN ITS ENTIRETY				
Address of Premise:		Square:	TYPE OF APPLI	CATION:
That ess of Trefinise.		oqua.e.	a. NEW	<i>-</i>
		Lot:	b. RENEWAL	
Owner of Business:	Owner's Addre			Phone:
Owner of business.	Owner 3 Addre	.33.		Filone.
Authorized Agent:	Address:			Phone:
Flori No.				
Firm Name:				
	Date Originally	issuea:		
Sidewalk Café Permit Number:				
Seating Capacity: Restaurant Sidewalk Café	_	Type: A. Enclo	sed B. Unenclo	sed
Size of Sidewalk Cafe: Length Width				
APPLICANT: I have read and understand the conditions set forth on this application. I further understand penalties are provided for furnishing false information. I hereby certify that the application and plans are complete and correct to the best of my knowledge; and that if a certificate is issued, the construction will conform to the D.C. Construction Codes, the Zoning Regulations and other applicable laws and regulations of the District of Columbia.				
Name: Signa	ne: Signature:			
Date:				
AGENT:				
Name: Signature:				
Date:				
BUSINESS OWNER:				
lame: Signature:				
Date: I hereby certify that I am the owner of the property; that the application and plans are complete and correct to the best of my knowledge; and that if a permit (or permits) is issued, the construction will conform to the D.C. Construction Codes, the Zoning Regulations and other applicable laws and regulations of the District of Columbia.				
District Department of Transportation Inspector Name	: Inspe	ctions and Comp	liance Administrat	ion
	•	•		
Approved:Disapproved:	l lispe			
PS Fees Applicable YesIf Yes, \$No	Appro	oved:	Disapproved:	
To report waste, fraud or abuse by any dc government office or official, call the inspector General at 1-800-521-1639.				