

APPLICATION FOR OUTDOOR DINING PERMIT

(Section 7.15 TOSW Zoning Regulations)

APPLICANT: _____

ADDRESS: _____

TELEPHONE: _____

SITE DESCRIPTION (Please include drawing detailing information):

Number of Tables: _____ Number of Seats: _____

Dining Area Specifics (location, site materials, etc.): _____

Dining Area Amenities (table/chair materials, umbrellas, awnings, etc.): _____

Parking Needs (outdoor): _____ Parking Needs (total site): _____

DATES FOR USE:

Open: _____ Close: _____

*I have read, understand and agree to abide by the South Windsor Zoning Regulations,
Outdoor Dining Permits:*

Applicant Signature: _____

Print name of Applicant: _____

Property Owner Signature: _____

Print name of Owner: _____

Approved: _____ Date: _____
Zoning Enforcement Officer