

CITY OF DE PERE

APPLICATION FOR REVOCABLE OCCUPANCY PERMIT

Fee:	\$32.00	
Receipt #:		
Date:		
Permit valid with updated		
insurance until revoked		

Α.						
Ι ΄ ΄ .	Applicant Information:					
	Name:					
	Address:					
	Phone:					
	Email Address:					
	Location of Encroachment:					
	Description:					
<u></u>						
B.	Required Information:					
	Copy of a current Certificate of Insurance, with City of De Pere named as an additional insured. See back to					
	general liability insurance	•				
		which accurately depicts the dimensions of the a	• •	tion of the		
	encroachment. See back	for any additional required materials for certain	types of occupancies.			
C.	Signature:					
		ved, I hereby agree to abide by all relev		taining to		
		pon City right-of-way, including but not limited	encroachments/obstructions upon City right-of-way, including but not limited to Section 106-6 and 7-3 of the			
				of the De		
1	Pere Municipal Code.			of the De		
	Pere Municipal Code.			of the De		
	Pere Municipal Code. Applicant		 Date	of the De		
			 Date	of the De		
D.			 Date	of the De		
D.	Applicant		 Date	of the De		
D.	Applicant For Staff Use Only: Reviewed by:			of the De		
D.	Applicant For Staff Use Only:		Date Date	of the De		
D.	Applicant For Staff Use Only: Reviewed by:			of the De		
D.	Applicant For Staff Use Only: Reviewed by: Director of Public Works			of the De		

PROOF OF INSURANCE:

Property owner/lessee agrees to save and hold the City of De Pere harmless from any and all injury that may occur to any party as the result of the requested encroachment upon the right-of-way referenced hereunder. This provision is intended to indemnify and hold harmless the City of De Pere to the fullest extent permitted by law and includes the payment of reasonable attorney fees for the defense of any claims brought which can fairly be said to be under the intent and purpose of the hold harmless agreement. To secure such hold harmless agreement, property owner/lessee shall maintain a general liability insurance policy on its business operations in an amount of not less than One Million Dollars per occurrence and has produced a Certificate of Insurance that the City is named as an additional insured and is entitled to coverage thereunder under the terms and conditions of the permit.

ADDITIONAL REQUIREMENTS FOR SIDEWALK CAFES:

Layout drawn to scale must include the dimensions of the existing sidewalk area and adjacent private property, the proposed location of the encroachment, including size and number of tables, chairs, steps, planters, umbrellas, location of doorways, trees, or other obstructions, either existing or proposed, within the right-of-way area. If available, please provide photographs depicting the area of encroachment.

Are you requesting permission to serve alcohol as part of the sidewalk café? $\ \square$ Yes $\ \square$ No

If yes, the permit holder must also contact the City Clerk-Treasurer's office at (920)339-4050 for a premise description change.