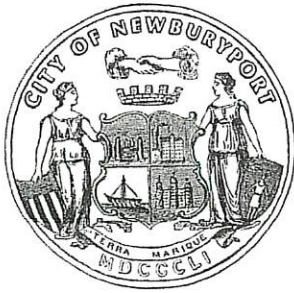


2024 Application - License to Occupy Outdoor City Property



City of Newburyport
Application Form 2024
Restaurant License
Occupy Outdoor City Property

RECEIVED
CITY CLERK'S OFFICE
NEWBURYPORT, MA

2024 FEB -5 P 3:40

****DO NOT USE THIS APPLICATION FORM FOR EVENTS****

Date Submitted: 2/4/2024

Business Name: AGAVE MEXICAN BISTRO

Business Contact: _____

Business Address: 50 STATE ST., NEWBURYPORT

Phone: 978-499-0428 Email: AGAVE@AGAVE MEXICAN BISTRO.COM

Property Owner: DAWN McCANDLESS

Outdoor Tables Quantity: 4 Dimensions: 72x61 Material: RESIN PLASTIC PICNIC
Quantity: 5 Dimensions: 4FT ROUND Material: IRON

Outdoor Chairs Quantity: 24 Dimensions: PICNIC TABLE SEATS Material: RESIN PLASTIC
Quantity: 20 Dimensions: 33" HEIGHT Material: IRON

Proposed Days/Hours of Operation: 7 DAY WEEK / 11:30 AM - 11 PM

Check all that apply:

- Applicant requests approval for food consumption.
- Applicant requests approval for alcohol consumption.
- Applicant requests approval for occupancy of public parking space(s).

NOTE: PICNIC TABLE DIMENSIONS INCLUDE THE ATTACHED SEATS

Attach the following materials:

- 1) Evidence of liability insurance with minimum coverage in the amount of one million dollars (\$1,000,000) per occurrence, naming the City of Newburyport as co-insured, and in force for the entire approved period of occupancy.
- 2) A clear and legible 8½-inch x 11-inch diagram of the proposed area of occupancy, detailing which shall be in addition to any other requirements of law, regulation or ordinance, including state alcohol law. **Such diagram shall demonstrate compliance with MAAB CMR 521 and all other Americans with Disabilities Act (“ADA”) requirements:**
 - a) Perimeter of proposed areas of occupancy, with relevant linear dimensions;
 - b) If such area includes portions of a public street traveled by vehicles, then the public, vehicular path of travel, no less than eleven (11) feet in width, or wider as may be required by the City Engineer;
 - c) All relevant obstacles such as streetlights, signs, trees, etc.; and
 - d) All tables, chairs, seats, total seating count and total occupancy; and
 - e) The area of occupancy must be enclosed by a fence, rope or other means to control access and demarcate the area proposed for the service of food and alcohol; and
 - f) Public, pedestrian path of travel no less than five feet in width.
- 3) Written authorization signed by the Applicant’s landlord acknowledging and agreeing to the use of the adjacent portion of any public way.

Applications shall be delivered to the Office of the City Clerk by hand, mail, or email:

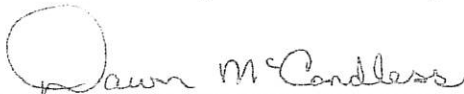
- 1) Office of the City Clerk
Newburyport City Hall
60 Pleasant Street
Newburyport, MA 01950
(978) 465-4407
clerk@cityofnewburyport.com
- 2) **The deadline for applications is 4:00pm Thursday, February 8th 2024 to be included in the February 12th City Council Meeting. Please note it will take at least 2 City Council Meetings to process your application.**

Processing:

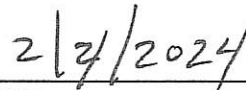
- 1) Application fee: **\$100.00**
Occupancy fee: **\$8/sq. ft.**
- 2) Applications will be reviewed by the City Council and forwarded to the Licensing Board. For applications to occupy a city park or playground, the City Council shall not consider or act upon such application until the earlier of (i) having received a recommendation by the Parks Commission regarding such application, or (ii) 30 days from the City Clerk's receipt of such complete application.
- 3) **The Licensing Board will then conduct a public hearing** on each application and determine whether to approve, approve conditionally, or deny it. The Licensing Board may not approve an application without a favorable recommendation by the City Council.
- 4) The City has no obligation whatsoever to approve any individual application, each of which shall be processed, reviewed, and a determination thereon made by the relevant City officers, boards, and commissions in their reasonable discretion.
- 5) Any condition of approval and submitted plan shall be in force for the entire duration of any validly issued license.
- 6) Any license issued may be revoked at any time by super-majority vote of the City Council, after a public hearing, for any reason, or no reason.

RELEASE AND INDEMNITY AGREEMENT TO ENCUMBER A PUBLIC WAY

I, the undersigned Applicant or Duly Authorized Agent, hereby agree to RELEASE, DISCHARGE, and HOLD HARMLESS, the City of Newburyport, a municipal corporation of the Commonwealth of Massachusetts, and its officers, employees, agents, and servants from all actions, causes of action, claims, demands, damages, costs, loss of services, expenses and compensation associated with the undersigned's use of the public way or other city property as described herein.



Signature of Business Owner



DATE

City of Newburyport

Outdoor Tables & Chairs

- 1) A minimum of five-feet of pedestrian clearance must be maintained for public pedestrian access. Tables, chairs, and/or all enclosure materials used to create a demarcated area for serving alcohol may not impede this required pedestrian clearance.
- 2) Tables, chairs, and/or enclosure materials to create a demarcated area for serving alcohol must maintain a minimum of 5-feet of pedestrian clearance from streetlights, signs, trees, benches, garbage barrels, or other sidewalk obstacles.
- 3) Tables, chairs, and/or personal property used to demarcate an area cannot interfere with curb ramps, driveways, fire escapes and/or doorways.
- 4) All tables and chairs that are chained, roped, or otherwise tethered together after business hours must be untethered during business hours.
- 5) Placement of tables and chairs on city property must conform in all respects to all applicable federal, state, and local laws and regulations, including, without limitation workplace safety rules and other public health regulations. Please contact the Newburyport Health Department for workplace safety rules specific to your business sector.
- 6) Like any license, permission to place tables and chairs outdoors on city property is revocable at the discretion of the City of Newburyport.
- 7) Initial licenses, unless revoked, shall remain effective until on or about October 31st and commencing on or about May 1st.

AGAVE MEXICAN BISTRO
50 STATE STREET
NEWBURYPORT MA 01950

2/5/2024

ESSEX

*** ADA Compliance Notes:**

Fencing on sidewalk at parklet will be staggered to allow for Wheelchair access to parklet and round table on parklet. Round tables on sidewalk as in previous years have always allowed two tables to be ADA compliant. The fencing we implemented last year was moveable to allow access yet still designate the space as a dining area.

PICNIC TABLES (PT) 5'x6'

* 4 TABLES 5' WIDE

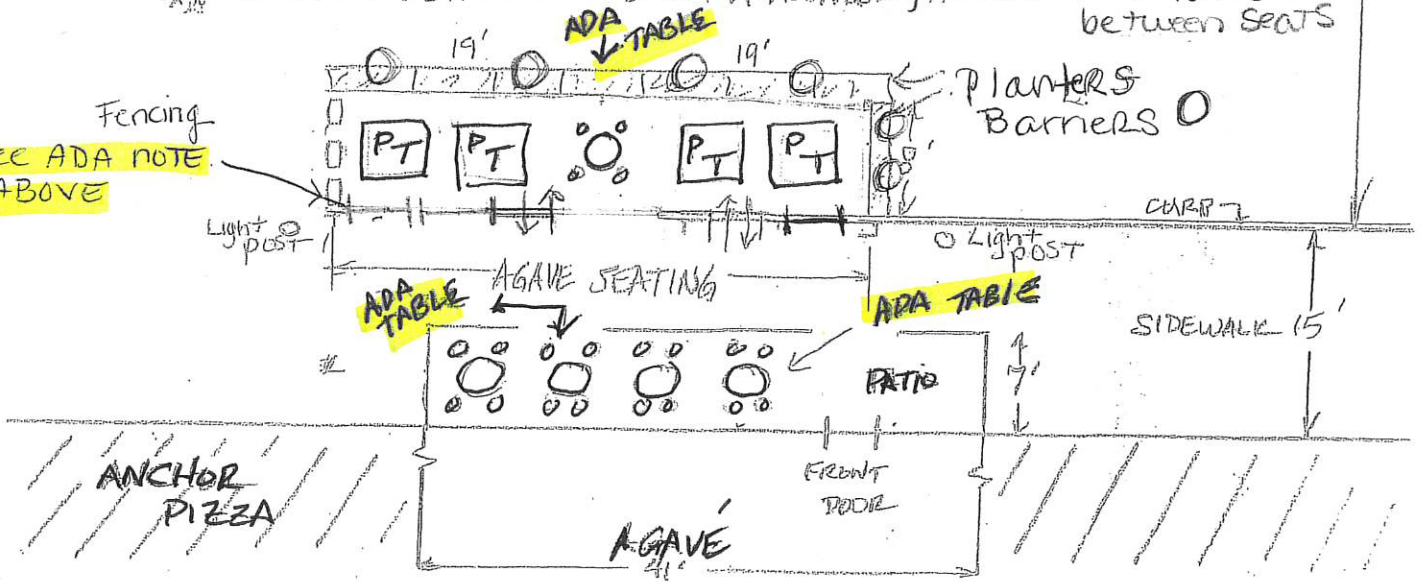
* 1 Round IRON TABLE (4' round)

* 4 CHAIRS - IRON (2 each side)

* 2 PARKING SPACES = 38' AVAILABLE, allows for 2' 12" feet between SEATS

STATE ST ~40'

* SEE ADA NOTE ABOVE



* NO CHANGES FROM 2023



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/08/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER MacDonald & Pangione Insurance Agency 104 Main Street North Andover, MA 01845 License #: 3377756	CONTACT NAME: Glendaly Gomez
	PHONE (A/C, No, Ext): (978)688-6921 FAX (A/C, No): (978)688-5350
	E-MAIL ADDRESS: glendaly@mpins.net
	INSURER(S) AFFORDING COVERAGE
	INSURER A : Greater New York Mutual Insurance Co.
	INSURER B : Greater New York Mutual Insurance Co.
	INSURER C : Massachusetts Retail Merchants
	INSURER D : Boston Insurance Brokerage
	INSURER E :
	INSURER F :

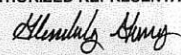
COVERAGES CERTIFICATE NUMBER: 00000585-50896 REVISION NUMBER: 8

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			1120M95925	06/05/2023	06/05/2024	EACH OCCURRENCE \$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
							MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
B	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB DED RETENTION \$			9020U95929	06/05/2023	06/05/2024	EACH OCCURRENCE \$ 5,000,000
							AGGREGATE \$ 5,000,000
							\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			MA 014005034171124	01/01/2024	01/01/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
							E.L. EACH ACCIDENT \$ 500,000
							E.L. DISEASE - EA EMPLOYEE \$ 500,000
							E.L. DISEASE - POLICY LIMIT \$ 500,000
D	Liquor L			1120M95925	06/05/2023	06/05/2024	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

outdoor seating for Mexican restaurant
re:45-50 State st Newburyport MA 01950
City of Newburyport is additional insured .

CITY OF NEWBURYPORT 60 PLEASANT ST NEWBURYPORT, MA 01950	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  (GGG)

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