



City of Newburyport

Application Form 2022 – UPDATED REQUIREMENTS Restaurant License Occupy Outdoor City Property

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

Date Submitted: 3/9/22

Business Name: The Port Tavern

Business Contact: Abigail Hannan

Business Address: 84 State St. Phone: 978.465.1006 Email: apierce @ theporttavern.com

Property Owner: Philip Wynn

Outdoor Tables Quantity: 10 Dimensions: Various (largest = 48" x 30") Material: metal + plastic

Outdoor Chairs Quantity: 35 Dimensions: 17 1/8" x 15 3/4" Material: metal + plastic

Proposed Days/Hours of Operation: 11:30 AM – 11:00 PM 7 days/week

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).

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 ext. 1205
rjones@cityofnewburyport.com
- 2) The deadline for applications is the close of business 7:00 pm Thursday, March 10th.

Processing:

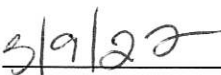
- 1) Application fee \$100.00
Occupancy fee \$5/sq. ft. pending in City Council.
- 2) Applications will be reviewed by the City Council and forwarded to the Licensing Board. For applications to occupy a city park or playground, the City Council shall not consider or act upon such application until the 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.

N.B. ODNC098_10_12_2021 is pending in City Council and may amend requirements to this license.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/09/2022

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 Malcolm & Parsons Insurance Agency 713 Washington Street P.O. Box 527 Stoughton MA 02072 | CONTACT NAME: Jaime Gonsalves PHONE (A/C, No, Ext): (781) 344-3200 E-MAIL ADDRESS: jll@malcolmandparsons.com | FAX (A/C, No): (781) 344-1425 |
| | INSURER(S) AFFORDING COVERAGE | |
| INSURED Bolwyn Corp. & Prince Place LLC DBA: The Port Tavern 84-86 State Street & 7 Prince Place Units 101 & 201 Newburyport MA 01950 | INSURER A: Trisura Specialty Insurance Company | |
| | INSURER B: MA Retail Merchants WC Group | |
| | INSURER C: | |
| | INSURER D: | |
| | INSURER E: | |
| | INSURER F: | |


COVERAGES **CERTIFICATE NUMBER:** Master 3/9/22 **REVISION NUMBER:**

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 checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | Y | | OSCPP-1000136-01 | 02/10/2022 | 02/10/2023 | EACH OCCURRENCE \$ 1,000,000 |
| | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 | | | | | | |
| | | | | | | | MED EXP (Any one person) \$ Excluded |
| | | | | | | | PERSONAL & ADV INJURY \$ 1,000,000 |
| | | | | | | | GENERAL AGGREGATE \$ 2,000,000 |
| | | | | | | | PRODUCTS - COMP/OP AGG \$ 2,000,000 |
| | | | | | | | Hired/Non-Owned Auto \$ 1,000,000 |
| | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY | | | | | | COMBINED SINGLE LIMIT (Ea accident) \$ |
| | | | | | | | BODILY INJURY (Per person) \$ |
| | | | | | | | BODILY INJURY (Per accident) \$ |
| | | | | | | | PROPERTY DAMAGE (Per accident) \$ |
| | | | | | | | \$ |
| A | <input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ | Y | | OSUXL1000168-01 | 02/10/2022 | 02/10/2023 | EACH OCCURRENCE \$ 1,000,000 |
| | AGGREGATE \$ 1,000,000 | | | | | | |
| | | | | | | | \$ |
| B | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | N/A | | 014005035060122 | 01/01/2022 | 01/01/2023 | <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 |
| A | Liquor Liability | | | OSCPP-1000136-01 | 02/10/2022 | 02/10/2023 | Each Occurrence \$1,000,000 Aggregate \$2,000,000 |

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

Neighborhood Tavern
 Liability policies provide coverage for outdoor patio seating.
 The City of Newburyport is Additional Insured with respect to General Liability.

| | |
|--|---|
| CERTIFICATE HOLDER City of Newburyport 60 Pleasant Street 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  |

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3/10/2022

The Port Tavern has been granted permission by the property owner to set up their expanded patio space in front of The Screening Room, 82 State Street, Newburyport, MA. The patio space will come down approximately halfway across the Screening Room's storefront to allow access for the business's trash disposal. The Port Tavern agrees to maintain a reasonable noise level on our patio during The Screening Room's hours of operation.

Rebecca Fundis 3.9.22

Business Owner Name

Date

 _____

Signature

Port Tavern

Screening Room

Pedestrian
Sidewalk

Tables: Metal + Plastic

Dimensions: A - 24" x 24"

B - 30" x 45"

C - 30" x 30"

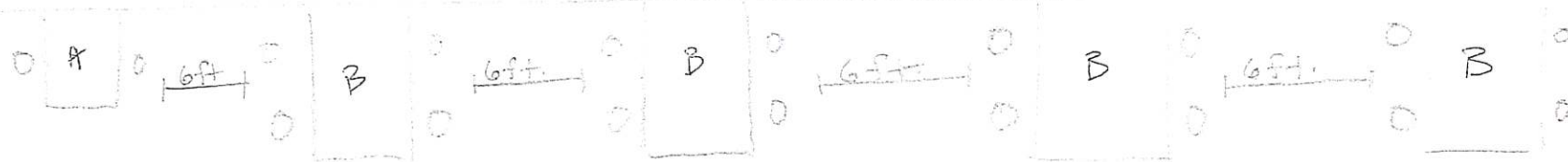
Chairs: Metal + Plastic 17 1/8" x 15 3/4"

+lost Stand: 21" x 19" wood

Planters - continuous barriers, wood, 48" x 12"

Entrance

Plant Stand



Tables must be ADA

~~ADA~~

40-ft.

Curb

Curb

Curb

Curb

Parklet

5 ft
8 ft

Tables are all 32" tall with 6 or more feet of aisle space in between.

