



# CITY OF CAPE MAY

643 Washington Street  
Cape May, NJ 08204  
(609) 884-9534 or (609) 884-9529



## MALL / PROMENADE PATIO PERMIT APPLICATION

Applicant Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Contact Tel. Number: \_\_\_\_\_

Property Owner: Yes \_\_\_\_\_ No \_\_\_\_\_

If No, Name and Address of Property Owner: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Awning: Yes \_\_\_\_\_ No \_\_\_\_\_

Sale of Alcoholic Beverages: \$2.50/square foot: Yes \_\_\_\_\_ No \_\_\_\_\_

Table Service: \$1.50/square foot: Yes \_\_\_\_\_ No \_\_\_\_\_

Seating Only: \$1.00/square foot: Yes \_\_\_\_\_ No \_\_\_\_\_

Square Footage: \_\_\_\_\_

Months of Operation: March April May June July Aug Sept Oct Nov

\_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_  
square footage # months of operation fee per square foot Total Amount Due

( ) I/we certify that this application is complete and accurate and that all the necessary zoning and other approvals have been secured. I/we understand that if any information on this form is found to be inaccurate, or if any necessary zoning or other approvals have not been secured, the City shall not be bound by any license issued in reliance of this certification.

( ) I/we certify that we have received a copy of the patio permit rules and regulations.

\_\_\_\_\_  
Date Signature of Applicant

For Office Use Only:  
Plans Approved by City Manager \_\_\_\_\_  
Insurance Verified \_\_\_\_\_  
Signed Hold Harmless Agreement \_\_\_\_\_  
Authorization of Property Owner \_\_\_\_\_  
Awning/Fence Permit \_\_\_\_\_

Amount Due: \_\_\_\_\_  
Pd. \_\_\_\_\_  
Ck. No. \_\_\_\_\_  
Date: \_\_\_\_\_

## Hold Harmless Agreement

To the fullest extent permitted by law, \_\_\_\_\_  
\_\_\_\_\_

agrees to defend, pay on behalf of, indemnify, and hold harmless the City of Cape May, its elected and appointed officials, its agents, employees and volunteers and others working on behalf of the City of Cape May against any and all claims, demands, suits, or loss, including all costs connected therewith, and for any damages which may be asserted, claimed or recovered against or from the City of Cape May, its elected and appointed officials, its agents, employees, volunteers or others working on behalf of the City of Cape May, by reason of personal injury, including bodily injury or death and/or property damage, including loss of use thereof, which arises out of or is in any way connected or associated with this contract.

By: \_\_\_\_\_  
For the Contractor

\_\_\_\_\_  
For the Municipality (Manager)

\_\_\_\_\_  
Notary

\_\_\_\_\_  
Notary

