

TOWN OF WESTFIELD
425 East Broad Street* Westfield, NJ
Phone (908) 789-4033 * Fax (908) 928-9316

SIDEWALK CAFE LICENSE APPLICATION

LICENSING PERIOD: MARCH 1 - NOVEMBER 30

APPLICANT _____

ADDRESS _____

PHONE _____

OWNER OF PRINCIPAL BUILDING (IF OTHER THAN THE APPLICANT)

NAME _____

ADDRESS _____

PHONE _____

PREPARER OF THE DEVELOPMENT PLAN (IF OTHER THAN THE APPLICANT)

NAME _____

ADDRESS _____

PHONE _____

FEES (Circle One)

01 - 10 SEATS (No more than 2 tables)	\$ 100.00
11 - 25 SEATS	\$ 250.00
26 - 50 SEATS	\$ 350.00
51 + SEATS	\$ 425.00

DATE _____ SIGNATURE _____

FOR OFFICE USE ONLY

CHECK _____ CASH _____ MO _____

DATE SENT TO INSP _____ COUNCIL MTG DATE _____

LICENSE # _____

6/29/17