

Outdoor Dining Permit Application

Applicant's Name:	
Applicant's Address:	
Applicant's Phone Number(s):	
Applicant's Email Address:	
Business Name:	
Location:	
Description of area to be used for outdoor dining:	
Hours of outdoor operation:	
Number of tables and/or chairs:	
Other:	
\square Tables, chairs and other items must be moved daily as to not inte	erfere with snow removal
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This permit does not authorize alcohol on any public property, ir Common, Waterfront, Streets and Sidewalks.	ncluding but not limited to the
Date	Applicant's Signature

Please send application and payment (payable to City of Gardiner) to: Code Enforcement Office, 6 Church Street, Gardiner, ME 04345