



Office Use Only	
Date Received:	_____
Date Referred:	_____
Date Approved:	_____

**DINE OUT LINCOLN  
APPLICATION FOR TEMPORARY USE OF PRIVATE SPACE**

- Dine Out Lincoln Permit is a temporary permit to allow the expansion of restaurants & other similar types of business during the current Directed Health Measure where there is a need to reduce occupancy and/or provide more spacing between customer tables in order to protect the health of the public. The expansion area can be indoors or outdoors and will be called an “Addition” in the application.
- No application or permit fee due to the City of Lincoln.
- Each question must be completely answered & all attachments included.
- Submit application & attachments to the: City Clerk’s Office, 555 S. 10<sup>th</sup> St., Lincoln NE 68508 or by email at [cityclerk@lincoln.ne.gov](mailto:cityclerk@lincoln.ne.gov).
- Dine Out Lincoln application will be reviewed and approved upon inspection by a committee of City Staff. A separate temporary permit will be issued.

**REQUIRED ATTACHMENTS:**

*Addition Site Plan* - indicating, to scale, measurements of desired amount of private property you are seeking permission to use & include the following: 1) location of all fencing, including design, gates, height; 2) a photo of the fencing material to be used; 3) location of all furniture, equipment, and any other article occupying public space; location of any existing light poles, planters, curbs, hand sanitizing stations; 4) amount of clearance between existing light poles, planters & curbs and your proposed sidewalk café; 5) additional information required if requested area is in parking lot. Refer to [Exhibit A].

**LIQUOR REQUEST SEE BELOW**

- Complete Application Form 110 for Addition & Form 112 for Deletion. These additions are intended to expire when the existing Directed Health Measure is lifted. NLCC applications can be found at <https://lcc.nebraska.gov/licensing-forms>. If you have questions, call the NLCC office at 402-471-2571.

For applicants intending to serve liquor in the temporary area, please see below You should already be an established liquor license holder, if not you will need to apply for a liquor license.

- Sign & date the Attachment for Form 110 & Form 112. Submit this attachment with your NLCC form 110 & 112 to the NLCC office.
- Site plan submission to the NLCC office must be identical to the site plan submitted for the Dine Out Lincoln Permit. There can be no deviations.

# DINE OUT LINCOLN PERMIT APPLICATION PRIVATE PROPERTY

*Please PRINT using blue or black ink only.*

Check mark existing permits & licenses: \_\_\_\_\_ Food Establishment Permit (\_\_\_\_\_ Permit #)

\_\_\_ Sidewalk Café(\_\_\_\_\_Permit#) \_\_\_ Current Occupancy #:\_\_\_\_\_ Liquor License #:\_\_\_\_\_

If other, explain: \_\_\_\_\_

RESTAURANT INFORMATION				
BUSINESS NAME:				
STREET ADDRESS:			CITY:	
STATE:	ZIP:		PHONE #:	
EMAIL ADDRESS:				

APPLICANT INFORMATION				
BUSINESS NAME:				
STREET ADDRESS:			CITY:	
STATE:	ZIP:		PHONE #:	
EMAIL ADDRESS:				
POSITION:				

PROPERTY OWNER (must be individual and/or legal entity)							
NAME:							
STREET ADDRESS:							
CITY:	STATE:	ZIP:		PHONE #:			
DOES THE RECORD PROPERTY OWNER AGREE TO SUCH USE? _____ YES _____ NO							
<b>ATTACH A LETTER OF CONSENT BY RECORD PROPERTY OWNER FOR THE USE OF SAID PROPERTY.</b>							

DAYS & HOURS OF OPERATION (No later than 12:30 a.m.)							
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
OPEN							
CLOSE							

# SITE PLAN REQUIREMENTS FOR TEMPORARY DINING

Please provide a **DETAILED** drawing to ensure your application is not denied. Attachments are accepted.

**REQUIRED:** Identify the locations & dimensions of the following on site plan:

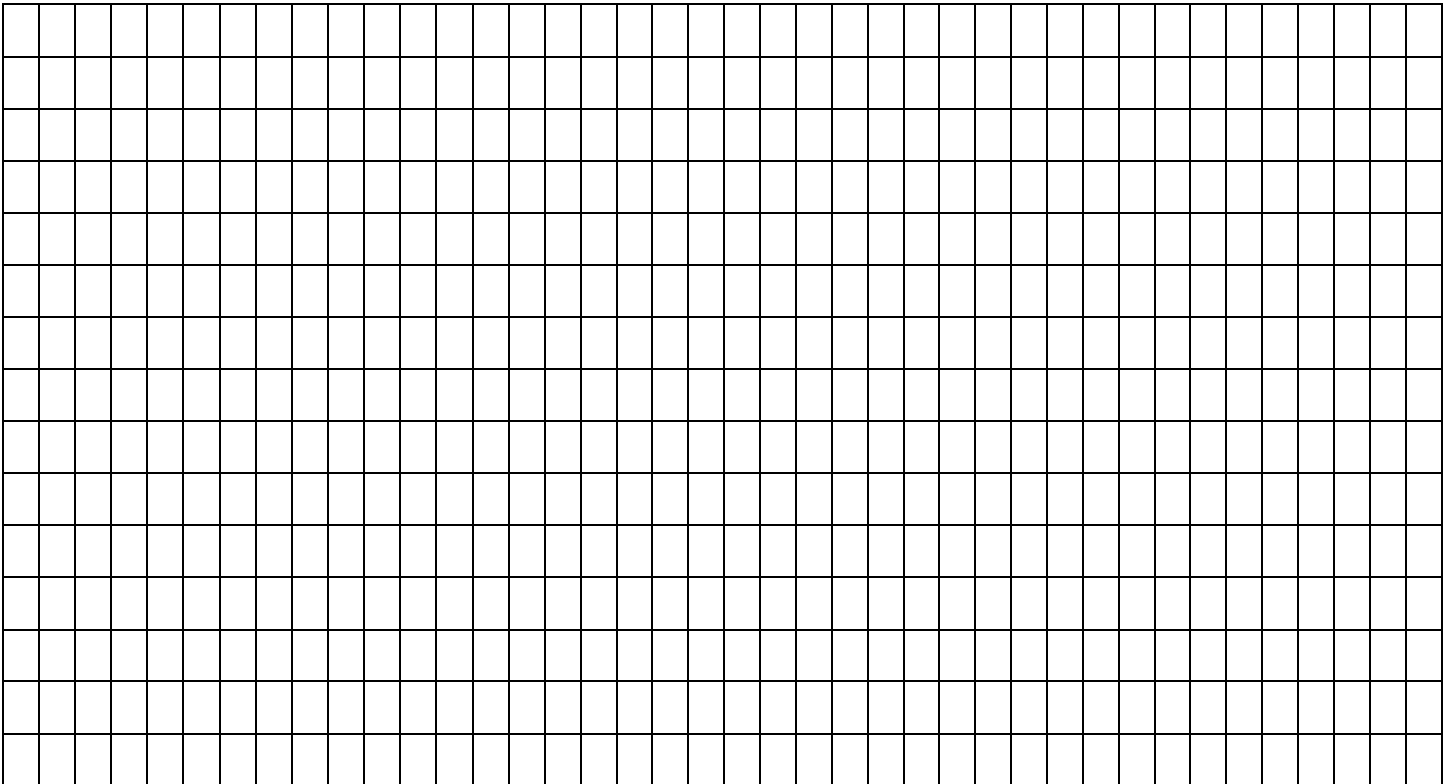
1. Size of area being used: \_\_\_\_\_
2. Size & location of table(s) & chair(s): \_\_\_\_\_
3. Size & location of hand sanitizing station(s): \_\_\_\_\_
4. Size & location of tent(s): \_\_\_\_\_ {Tents larger than 400 sq. ft require a tent permit}  
<https://lincoln.ne.gov/city/build/forms/tent-permit.pdf>
5. Entry & exit points & dimensions: \_\_\_\_\_ {min. of 2}
6. Identify location of the following: Planters (#\_\_\_\_) & Trash Containers (#\_\_\_\_)
7. Identify location of restaurants entrances & exits adjacent to the temporary outdoor dining area.
8. Fencing or retractable stanchions, ropes, line dividers, or other barriers are **REQUIRED** for identifying separation of dining area. Identify type of barrier: \_\_\_\_\_

If in a parking lot:

- a. Identify area used in parking lot. \_\_\_\_\_ x \_\_\_\_\_ Check mark: \_\_\_Shared \_\_\_Private
- b. (#\_\_\_\_) of stalls to be used for dining area.
- c. (#\_\_\_\_) of stalls remaining for parking.
- d. If shared lot, adjacent business must still have the minimum required parking stalls for their business.

**Note: Questions relating to entry/exit points; electrical wiring; tent sizes can be directed to:**

**Chuck Schweitzer, Fire Prevention Bureau: (402) 441-6441.**



**EXIHBIT A**

**ATTACH EXTRA PAGES IF NECESSARY**

## TERMS AND CONDITIONS

*Please read and initial each line item to confirm all parties understand the standards and requirements for temporary dining areas. The applicant agrees:*

\_\_\_\_\_ It is currently subject to a state or local directed health measure (DHM), concerning Covid-19, where there is a need to reduce occupancy and/or provide more spacing between customer tables in order to protect the health of the public.

\_\_\_\_\_ It wishes to add a temporary addition to a currently premise under the control of the Applicant.

\_\_\_\_\_ Only existing restaurants and other establishments with a valid certificate of occupancy will be considered for temporary dining.

\_\_\_\_\_ To comply with Lincoln-Lancaster County Health Department and the CDC guidance and recommendations while a Directed Health Measure is in place.

\_\_\_\_\_ If a state or local DHM requires closure of a licensed premise, it will not sell or disperse food and/or liquor, or allow customers, in the requested Addition.

\_\_\_\_\_ The Addition shall only be approved for the period of time that a state or local DHM, concerning Covid-19, is in effect or no later than September 30, 2020, whichever occurs first.

\_\_\_\_\_ Upon expiration of a DHM, related to Covid-19, the Applicant's Deletion Application is immediately effective and the Applicant will abandon the use of the Addition.

\_\_\_\_\_ If the DHM, related to Covid-19, has not expired by September 30, 2020; the Applicant's Deletion Application is immediately effective on September 30, 2020 and the Applicant will abandon the use of the Addition. The Applicant may use the Addition on September 30, 2020, but not after.

\_\_\_\_\_ That upon the expiration, suspension, or termination of the Applicant's lease or permit, or other form of authority, to use the Addition; the Applicant will immediately abandon the use of the Addition.

\_\_\_\_\_ Addition must be located directly adjacent to the existing establishment, or (if no liquor) a location within the approved dimensions identified on the site plan.

\_\_\_\_\_ Addition must be delineated in some manner by a temporary fence or other approved barrier.

\_\_\_\_\_ To separate tables for social distancing to attain a minimum 6-foot separation between chairs with patrons occupying them.

\_\_\_\_\_ To require customers to follow the current Directed Health Measure and/or Lincoln-Lancaster County Health Department guidance and recommendations.

\_\_\_\_\_ To provide hand sanitizing stations required in any outdoor Addition.

\_\_\_\_\_ Maintain all current entrances and exits to all adjacent structures.

\_\_\_\_\_ To not make any modifications to the approved Site Plan within the Application or contained on Exhibit A.

\_\_\_\_\_ To not install any tents on public property. If private property is also being used, the Applicant will apply for a Tent Permit. If you have questions contact Building & Safety Department at 402-441-7521 or <https://lincoln.ne.gov/city/build/permits.htm>

\_\_\_\_\_ To not use the Addition for any other uses besides the consumption of food and beverage. The Applicant shall not allow live entertainment, gaming activities, TV's, and other retail sales in the Addition that would require the participant to leave the table in order to participate.

\_\_\_\_\_ To prohibit pets are permitted in an outdoor Addition, except service animals.

\_\_\_\_\_ To prohibit open flames, cooking or food preparation in an outdoor Addition.

\_\_\_\_\_ To be responsible for property disposing of all trash in appropriate refuse containers.

\_\_\_\_\_ For Additions in parking lots, to provide physical barrier or separation to protect customers from vehicle traffic. Outdoor seating cannot be in ADA parking spaces, unless ADA parking spaces are provided elsewhere.

\_\_\_\_\_ All Additions must pass and applicable City or State inspections and meet Fire Code standards.

\_\_\_\_\_ If dispensing and selling liquor is the proposed addition, the Applicant obtained approval from the Nebraska Liquor Control Commission (NLCC) by, contemporaneously filing an Application for Addition to Liquor License ("Addition Application") and an Application for Deletion to Liquor License ("Deletion Application"), and the Attachment.

\_\_\_\_\_ To maintain the Addition and keep it free and clear of obstructions or other dangerous conditions, and free of litter.

\_\_\_\_\_ If using public property, to return the property in the condition it was prior to the Applicant's use or better, or to reimburse the City for any loss or damage cause by the Applicant's use or vacation of the public property.

\_\_\_\_\_ In consideration of being issued a Dine Out Lincoln Permit for the temporary use, should a permit be issued, the Applicant has the compacity to bind the Applicant and/or any person, business or entity benefiting from the Dine Out Lincoln Permit to the terms and conditions of this agrees to the terms and conditions of such permit as contained in this Application and any attachments herein incorporated by reference.

\_\_\_\_\_ The undersigned further agrees that all times hereafter to comply with directed health measures, all municipal ordinances, rules and regulations of the City of Lincoln and any applicable state or federal rules, regulations directed health measures, or laws.

_____	_____	_____
Printed Name of Applicant	Date	Applicant's Signature
_____	_____	_____
Printed Name of Witness	Date	Witness Signature