



# Village of Salmo Outdoor Patio Application Form

## Bylaw No. 730, 2021

OFFICE USE ONLY			PAYMENT STAMP
<b>PERMIT #</b>			
<b>FEES</b>	<input type="checkbox"/>	<b>New Outdoor Patio Permit Application</b>	<b>\$75</b>
	<input type="checkbox"/>	<b>Annual Inspection</b>	<b>\$50</b>
		Application Fee	

### REQUIREMENTS FOR COMPLETE APPLICATION

**When applying for a Permit, the following items must be submitted as a complete package\*:**

- A completed application form
- Application fee
- Proof of property tax payment
- Legal description and civic address of property
- Site plan showing the building/property/street details with measurements and location of the proposed outdoor patio
- Fence details including photos, height, and appearance information
- Coloured rendering to scale of the outdoor patio with planned furniture (tables and chairs)
- Copy of Business License
- Copy of insurance (minimum \$5 million coverage with the Village of Salmo added as an additional insured)
- Agreement letter/permission from property owner (if applicable)

Note: Additional information may be required by the Village upon review of your application package.

### APPLICATION INFORMATION

#### PROPERTY UNDER APPLICATION

CIVIC ADDRESS:	LEGAL DESCRIPTION:
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#### APPLICANT

APPLICANT IS THE:	<input type="checkbox"/> Owner <input type="checkbox"/> Designer/Contractor**	<input type="checkbox"/> Tenant*: BUSINESS LICENSE # _____ <input type="checkbox"/> Other Authorized Agent **of _____
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**\* THE APPLICANT IS RESPONSIBLE FOR ENSURING ALL PROPERTY OWNERS HAVE REVIEWED AND ARE IN AGREEMENT WITH THIS PROPOSAL**

**\*\*IF APPLICANT IS NOT AN OWNER (PROPERTY OWNER OR TENANT) THEN AN *OWNER AUTHORIZATION FORM* MUST BE SUBMITTED [salmo.ca/municipal-services/forms/](http://salmo.ca/municipal-services/forms/)**

NAME:	BUSINESS NAME:
E-MAIL:	PHONE:
MAILING ADDRESS:	POSTAL CODE:

#### PROPERTY OWNER (IF DIFFERENT FROM APPLICANT AND/OR BUSINESS OWNER)

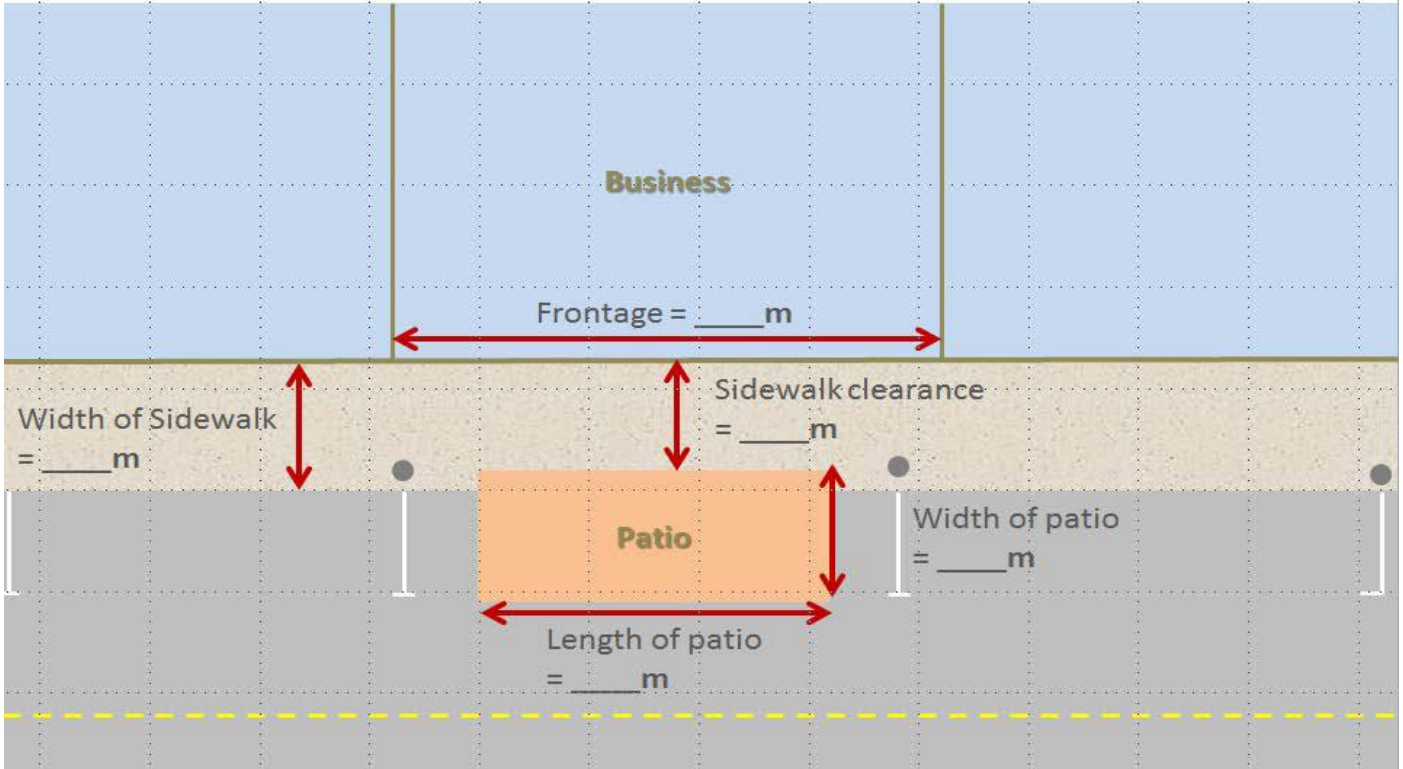
NAME/ COMPANY:	PHONE:	E-MAIL:
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The Village of Salmo is collecting your personal information in accordance with Section 26 of the *Freedom of Information and Protection of Privacy Act*. The Village of Salmo collects your information for the purposes of administering Village programs and services, including permits and licensing services. If you have any questions, please contact the Chief Administrative Officer at [cao@salmo.ca](mailto:cao@salmo.ca) or (250) 357-9433.

**DESIGN INFORMATION**

**SITE PLAN**

If the information is not provided on the site plan or rendering through the building permit application, please fill-out the appropriate information below:



<p>Number of parking spaces to be used:</p> <p><input type="checkbox"/> ___ parallel</p> <p><input type="checkbox"/> ___ angled;</p> <p>Maximum of 2 parallel or 5 angled parking spaces may be used.</p>	<p>Identify any obstructions sidewalk obstructions of the proposed outdoor patio (<i>can be identified on the illustration above</i>):</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>
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## CONSTRUCTION SPECIFICATIONS

CONSTRUCTION MATERIALS	_____ _____ _____
COLOURS OF OUTDOOR PATIO	_____ _____ _____
BARRIER-FREE ACCESSIBLE	The outdoor patio must have barrier-free access for persons with disabilities including wheelchairs
PARTITION DETAILS	<input type="checkbox"/> Height must be 1m (3'3") measured from patio level <input type="checkbox"/> Bottom rail maximum height 75cm (30") from above grade <input type="checkbox"/> Dimensions of vertical or horizontal members _____ (max. 5cm (2") width)
AWNING STRUCTURE	<input type="checkbox"/> Yes (additional details must be attached) <input type="checkbox"/> No
LIGHTING DETAILS	Type of lighting: _____

## OPERATIONAL DETAILS

Dates of operation: Permit is valid from April 15 to October 15 in the year issued	Start _____ End _____
Hours of operation: Sunday through Thursday: must close by 9:00 PM Friday and Saturday: must close by 11:00 PM	Open _____ Close _____
Will there be amplified music? Can only be used Friday and Saturday and must be turned off by 10:00 PM	<input type="checkbox"/> Yes <input type="checkbox"/> No

## SIGNATURES

**Application Declaration:** I declare that the information submitted in support of this application is, to the best of my knowledge, true and correct and that I will submit further information deemed necessary by the Village for processing this application. I acknowledge that all fees paid in connection with this permit are non-refundable.

**Liability and Indemnity Clause:** IN CONSIDERATION OF THIS PERMIT being issued, I release and indemnify the Village of Salmo, its Council members, officers, employees, and agents from and against all liability, claims and other expenses of any kind which I, or any other person, may have in connection with anything said or done, the granting of this permit or any action taken or not taken, by the Village of Salmo and I agree that the Village of Salmo owes me no duty of care in respect of these matters.

**Applicant Responsibility:** I acknowledge that I, as Applicant, am responsible for ensuring that all Property Owners are aware of and are in agreement with this application. Furthermore, I acknowledge that the Village takes no responsibility for upholding Tenant/Landlord agreements, nor any other agreement between parties outside of the Corporation of the Village of Salmo.

**THIS IS NOT A PERMIT AND DOES NOT AUTHORIZE COMMENCEMENT OF WORK.**

\_\_\_\_\_ Dated this \_\_\_\_\_ Day of \_\_\_\_\_ 20 \_\_\_\_\_  
**APPLICANT'S SIGNATURE**