

TOWN OF CLINTON

INCORPORATED APRIL 5, 1865

43 Leigh St., P.O. Box 5194

Clinton, N.J. 08809-5194

(908) 735-8616 FAX (908) 735-8082

Town of Clinton recovery guidelines for outdoor eateries & outdoor retail services

Purpose of this plan is to assist our locally owned restaurants and retail owners to recover from the closure of their businesses during the COVID-19 pandemic. The plan will allow businesses to expand their footprint during the state-enforced social distancing requirements to deter the spread of the coronavirus.

Regulations:

Tables & Chairs:

- Outdoor Seating can be expanded to adjacent properties with the neighboring property owners consent.
- Tables in sidewalk area must be six feet apart measured from the backs of the opposite chairs in all directions.
- Maintain a four foot pedestrian travel lane. (i.e. all tables, chairs, and signage must be at least four feet from the curb if placed on a public sidewalk)
- Entrances and exits to businesses must not be blocked.
- Fire hydrants may not be blocked.
- For restaurants permitted BYOB alcohol consumption, such is limited to only wine and beer.

Permit outdoor signage that was previously prohibited:

- Allow one banner sign on the building wall advertising the hours of operation, banner sign not to exceed 5% of the building wall to which it is attached maximum banner size permitted is 3' x 6'.
- Allow one standing sign in the C-4 zone to advertise hours of operation, standing sign not to exceed six (6) square feet. One A-frame and easel sign per business is permitted in the C-1 and C-2 Districts provided that they do not exceed 6 square feet in size or 42 inches in height inclusive of a frame or stand.

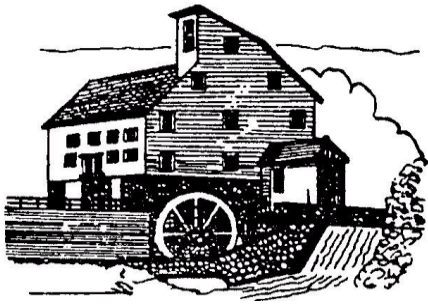
Tents

- Must meet all local safety guidelines, including weights to prevent from becoming

airborne during high winds. The tent may not have any walls, a minimum headroom of seven (7) feet must be maintained at all times. No cooking shall be done under the tent.

Insurance- Applicant must provide proof of liability insurance and agree that the Town will be held harmless and indemnify from any claims by naming The Town of Clinton as Additional Insured.

Business who wish to participate must submit a permit with a sketch showing the location of where the tables & chairs, tent, and signage will be placed.



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APPLICATION FOR OUTDOOR PERMIT

Date of Application _____ Block _____ Lot _____ Zone _____

Name of Business: _____

Address: of Business: _____

Phone: _____ Email: _____

Owner of the Property is not the owner of the business: _____

Manager of the Business: _____ Cell Number _____

Intended use for sidewalk: _____ Serving food & Drink _____ Retail _____

Days & Hours of operation: _____

Please describe the use of the sidewalk (number of tables, chairs, displays, tents, etc.)

_____ Number of tables _____ Number of Chairs (no more than 8 per table)

_____ Banner sign (not to exceed 3 x 6 or 5 % of the building wall to which it is attached)

_____ Standing A-frame or easel sign (not to exceed 6 SF)

Check List that must be submitted with the application:

- A 8 ½" X 11" Plot plan drawing indicating the location of tents, tables, chairs, displays and signage. The Plan must show the distance of all tables and chairs from the curb, which must be at least four feet. In the event the Town elects to close the parking spaces on the right-hand side of Main Street on certain nights and reserve such for pedestrian traffic, please provide an alternate plan allowing for expansion to the curb if your business is located on that side of the street.
- Certificate of Liability. If expansion is on to public sidewalk, the Town must be named as an additional insured.
- Letter from adjacent property owner if expanding seating, signage, or tables into adjacent business sidewalk space

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I, _____ (signature) _____ (Print Name)
As a representative of the above named business, do hereby acknowledge that I have received,
read and will abide by the Temporary Outdoor Recovery guidelines (attached) and that non-
compliance will result in citations, fines and or loss of sidewalk usage.

FOR OFFICE USE ONLY

Date Received _____ Permit Approved: _____ Permit Denied _____

Signature of Zoning Officer _____ Date _____