APPLICATION FOR OUTDOOR DINING REVOCABLE PERMIT

THIS S	ECTION TO BE FILLED O	UT BY PROPERTY OW	NER	
BUSINESS NAME	BUS	BUSINESS PHONE NUMBER		
CONTACT NAME		CON	NTACT PHONE NUMBER	
PROPERTY ADDRESS		CON	NTACT EMAIL	
CITY, STATE, ZIP CODE		PAR	PARCEL NUMBER	
LEGAL DESCRIPTION OF PROPERTY ATTACHED:			FEDERAL TAX ID NUMBER	
Description for use of Property				
(attach a dimensional site plan & e	levation drawing to scale on 8 1/2	2 x 11 paper)		
Conditions Determined by Dev	O BE FILLED OUT BY <u>DR</u>	(I (DEVELOPIVIEIVI NE	VIEW IEAWIJ	
	Date:	Approved	Denied	
Publ. Util:	Data	Approved	Denied	
Engineering:	Date:	Approved	Denied	
Transportation:	Date:	Approved	Denied	
Fire:	Date:	Approved	Denied	
DRT forms may be found at h	ttp://www.scldocs.com/building/DR	RT Application 03 29 2016.pdf (email to: DRT@slcgov.com	
				_
THIS SECTI	ON TO BE COMPLETED	BY PROPERTY MANA	GEMENT	
Description Letter (Outl	ine what the applicant is reque	esting. Include anticipated	work.)	
DRT Signed off	DRT#_			
Drawings (2) (dimension	nal site plan with legible details	s on 8 1/2 x 11 paper)		
Certificate of Insurance				
	(Non Refundable) Initial Lease	Payment Paid in Advance		
Initial Payment Paid in A				
	te Services has all documents			
OKAY to issue: Subject t	0			
Checked By		Date		