



TOWN OF EAST HAMPTON PLANNING DEPARTMENT

TRANSFER OF OUTDOOR DINING AREA ADMINISTRATIVE PERMIT APPLICATION

IMPORTANT: PLEASE READ THE ENTIRE APPLICATION FORM PRIOR TO SUBMITTING

NOTE THAT THIS PERMIT MUST BE RENEWED ON AN ANNUAL BASIS

I. APPLICATION INFORMATION

BUSINESS NAME: _____

Street Address: _____ SCTM# _____

Hamlet: _____ Zoning District: _____

Date and number of the most recent valid Certificate of Occupancy (CO): _____

How many total seats are currently approved by the Suffolk County Department of Health Services (SCDHS) for this establishment? *(please attach SCDHS approval)*

Indoor: _____ Outdoor: _____ Total: _____

How many outdoor seats are proposed? # _____ % _____
(Number of seats and percentage of currently approved seats)

Location of proposed outdoor seating: Subject Property Adjacent Property Right-of-Way

Are any surface materials such as gravel, flagstone, etc. proposed for the seating area? _____

Is any temporary additional lighting proposed? _____

Are any temporary provisions for heating proposed? _____

Are any temporary tents proposed? *(These will also require separate approval of the Fire Marshal)* _____

II. APPLICANT INFORMATION

Name: _____

Applicant is (circle one): Business Owner Attorney Other (specify) _____

Mailing Address _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

STATE OF _____)

SS:

COUNTY OF _____)

_____, being duly sworn, deposes and says that he/she is the

- Owner of the Property
- Attorney for the Owner of the Property
- Agent for the Owner of the Property

and that all statements made in this application are true to the best of his/her knowledge and belief; and that he/she has read the notices contained in this application and understands the same and agrees to abide thereby; and that the project which is the subject of this application, if approved, will be carried out in accordance with the terms and conditions set forth by the Planning Department in their decision and in accordance with all applicable laws.

Signature of Applicant/ Agent

Sworn to before me this

_____ day of _____, 20_____.

NOTARY PUBLIC

STATE OF _____) COUNTY OF _____)

AUTHORIZATION

I, the owner, hereby authorize the Planning Department to enter the subject parcel to review the pending request for a modification. Town employees are authorized to enter the premises to ascertain compliance with zoning and other building laws, regulations and ordinances.

Signed: _____

ATTEST:

STATE OF _____)

SS:

COUNTY OF _____)

On the _____ day of _____, in the year _____, before me personally appeared _____, Personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) who name(s) is/are subscribed to this instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity (ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.



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INSTRUCTIONS

This application is for an Administrative Transfer of Outdoor Dining Area permit to be issued at the discretion of the Planning Department in accordance with section 255-11-88 of the Town Code. When granted, this permit allows a restaurant or take-out food store to relocate a quantity of permitted indoor seating as outdoor seating. Applicants are encouraged to read this section of the Town Code before applying to understand the applicable standards and criteria for this permit.

Once approved, the permit will expire on DECEMBER 31st of the year during which you applied.

Applications to add seating within right-of-ways, including sidewalks, that are not owned by the Town of East Hampton will require separate approvals (e.g. seating within the Montauk Highway right-of-way will require approval of the New York State Department of Transportation).

REQUIRED ITEMS: *All REQUIRED ITEMS submitted must also be submitted in digital form. This may be in the form of (1) a flashdrive, (2) an email with PDFs or (3) a link to your Dropbox.

1. One (1) original copy of the signed and notarized **application form**. There is NO FEE
2. One (1) copy of a valid assembly permit from the **Suffolk County Department of Health Services (SCDHS)** which includes the approved number of seats for the establishment.
3. One (1) original copy of a **site plan** based upon a survey. If a site plan is not available, then a detailed sketch may be submitted. The site plan or sketch should include the following information, or, where necessary, this information shall be provided on more than one plan:
 - The location of the outdoor dining area on the subject property and in relation to existing on-site buildings and structures
 - The overall perimeter dimensions and design of the outdoor dining area, including any substrate such as gravel, flagstone, etc. or any associated accessory structures such as pergolas, fencing, etc.
 - The number and arrangement of seats and tables as well as applicable design features (e.g. umbrellas, picnic tables or loose tables and chairs, etc.)
 - The location of entrances and exits, including emergency exits, as well as the dimensions of aisles between tables and chairs
 - Location and description of any proposed landscaping associated with the outdoor dining area, including: quantity, spacing, height, & species
 - Location and description of any proposed lighting associated with the outdoor dining area, including: manufacturer's specification sheets illustrating the appearance and design of the fixture(s), location, mounting height, and quantity of fixtures, initial light output (Lumens), color temperature (Kelvin).
 - Location and description of any proposed heaters associated with the outdoor dining area.
 - Location and description of any proposed tents associated with the outdoor dining area.
 - Applications that propose utilizing private property not under the ownership of the applicant require a notarized authorization letter from the property owner.

Please submit all required information to the Planning Department. Once you have received an Administrative Transfer of Outdoor Dining Area Permit please keep a copy at the subject premises at all times.