



City of Florence
A City in Motion

Temporary Expansion of Outdoor Seating Acknowledgment (Private Property)

This form is for restaurants who are looking to expand their outdoor seating into current parking spaces that are currently counted towards the property's parking minimum. This expansion of outdoor seating program by the City of Florence is a temporary allowance being granted by the City to existing City regulations that would otherwise limit this practice. The City of Florence reserves the right to change this temporary allowance at any time. **Questions?** Contact Sarah Moehrke, Economic Development Catalyst by phone (541-991-8276) or Email (Sarah.Moehrke@ci.florence.or.us)

Name of Business:	
Physical Address:	
Mailing Address:	

Property Owner Information

Name:			
Mailing Address:		City, State, Zip:	
Phone:		Email:	

Requirements (Please initial after every requirement to acknowledge acceptance):

- Each table in the expanded outdoor seating area is served using table-service method. _____
- Each table in the expanded outdoor seating area is within visual sight of the interior of the restaurant . _____
- At the end of the day, chairs will be stacked and tables secured. _____
- The business will create a barrier between tables in parking spaces and active parking spaces . _____
- The restaurant will follow the guidelines set by the State of Oregon to prevent the spread of COVID-19. _____
- The City of Florence reserves the right to revoke this agreement at anytime. _____
- This agreement will expire on October 30, 2020. _____

*****Along with this form, Please submit written permission from property owner (if different than business owner), and a drawing that designates what parking spaces will be used for expansion of outdoor seating.**

Primary Contact Information

Name:			
Mailing Address:		City, State, Zip:	
Contact Phone:		Contact Email:	

- I certify that I will assume all risks associated with the use of the parking spaces as outdoor dining space
- I certify that I will contact the City of Florence should any of the information listed above change.

Signature:		Date:	
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Once completed, please return to Camellia Jensen via email (Camellia.Jensen@ci.florence.or.us) with all necessary documentation.