



# Outdoor Dining Application

City of Dover, New Hampshire Dover  
Fire & Rescue

Inspection Services Division  
Physical Address: 262 Sixth Street  
Mailing Address: 288 Central Avenue  
Dover, NH 03820  
NH Telephone: (603) 516-6038  
Fax:(603) 516-6146

- Private property (no fee required)
- Public property
- Will include seasonal use of outdoor heaters
- Requesting use of City parking spaces for seating

Please complete the following application and submit it to the City of Dover, Inspection Services Division Office. Applications can be e-mailed to [dover-inspections@dover.nh.gov](mailto:dover-inspections@dover.nh.gov) or delivered to the Inspection Services office at 262 Sixth St; Dover NH. This outdoor dining license will be in effect with the Applicant's Health License (see date restrictions for use on City Property below). It aligns with the guidance provided in Governor Sununu's Emergency Order #40, Exhibit C; Section A, and will be automatically extended or adjusted per any modifications to that guidance. Sidewalk seating applicants should be mindful of the requirements of Dover Chapter 125-20 (exception – dates of applicability). All other requirements of Chapter 125-20 are applicable. This application will serve as the permit normally required by Chapter 125-20. All outdoor dining must abide by Emergency Order #40, Exhibit C; Section A. The City has the right to amend any temporary license for good cause, as well as the right to revoke any temporary licenses at any time for non-compliance. Please note, some of the terms of this permit are specific to the current State of Emergency as defined in Executive Order 2020-04. Upon any changes to the existing State of Emergency, the City of Dover reserves the right to adjust the allowances defined within this Permit, accordingly.

**Applicant/Restaurant Name:** \_\_\_\_\_

Address (Street/City/State/Zip): \_\_\_\_\_

Phone number(s): \_\_\_\_\_ Email: \_\_\_\_\_

Address of proposed Dining Area (*if different than restaurant address*): \_\_\_\_\_

Dining Area property owner: \_\_\_\_\_

Address (Street/City/State/Zip): \_\_\_\_\_

Phone number(s): \_\_\_\_\_ Email: \_\_\_\_\_

Please check the following boxes as they are completed.

- 1) A plan is attached to this application depicting the following: outline of the proposed space; proposed table layout; entrance/exits; any adjacent traffic/parking/sidewalk areas; lighting; outdoor heaters. The plan should show dimensions that demonstrate its ability to meet the guidelines outlined in Exhibit C of Emergency Order #40. Lighting capacity will help staff determine the hours of operation for safely conducting business outside. Sidewalk seating plans should be mindful of Dover Chapter 125-20 guidelines. Indicate quantity and location of any proposed heating fuel storage. **Fuel shall not be stored inside.**
- 2) If the applicant is not the owner of the proposed seating area property, provide written authorization of property owner for temporary outdoor dining. Authorization for the use of City of Dover property is implied via approval of this application. Dining on City property is valid from March 15 - October 15. The City reserves the right to require seating/barricade removal to allow for unexpected snow removal needs.
- 3) Copy of license from New Hampshire Liquor Commission, if applicant intends to serve alcohol.
- 4) Insurance: if the outdoor dining area is on City of Dover property or any property controlled by the City of Dover, the applicant shall secure and maintain a General Liability Insurance policy or policies at no cost to the City of Dover for the duration of the use. The coverage of said policy shall be not less than

(\$1,000,000) per occurrence and (\$2,000,000) aggregate. An insurance certificate shall be supplied to the City of Dover, proof of an endorsement or policy additional insured provisions confirming the City of Dover's additional insured status. The City of Dover shall be named as an additional insured on the licensee's general liability insurance policy, which coverage shall apply on a primary and noncontributory basis, and, subject to the dollar amounts specified above, cover the City of Dover with the same scope of coverage provided to the licensee under the general liability policy without subjecting the City of Dover to any different or additional terms, conditions, limitations or exclusions.

- 5) The business ensures that the guidelines indicated in *Employee Protection; Consumer Protection Guidelines; and Business Process Adaption Guidelines* of Exhibit C will be adhered to.  
<https://www.governor.nh.gov/news-media/emergency-orders/documents/emergency-order-40.pdf>

I/We \_\_\_\_\_ (owner/s) of \_\_\_\_\_  
(restaurant name) will abide by the City of Dover's Food Service Establishment ordinance (Chapter 85) the requirements of this application and Emergency Order #40 as set forth by the State of NH, regarding outdoor dining. I/We understand the failure to comply with outdoor dining requirements may result in the suspension/revocation of the outdoor dining permit.

All restaurants will continue to follow the 2017 food code regulations.

The application shall be complete to review for Building and Life Safety Codes, including health and overall general safety compliance. All questions must be answered and all applicable check boxes must be checked. Failure to do so shall result in an incomplete application which will not be processed. The undersigned attests that the supplied information is accurate and complete and requests that the City of Dover Inspection Services proceed with processing this application.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\*\*\*\*INSPECTION SERVICES USE ONLY\*\*\*\*

**\*\* OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE \*\***

Fee (*Waived during State of Emergency*) **\$50.00** Cash \$ \_\_\_\_\_ Check # \_\_\_\_\_

**Health Inspector Approval:** \_\_\_\_\_ **Date** \_\_\_\_\_

THIS LICENSE IS  ISSUED with the following conditions:  DENIED for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Building Official