

CARLOS PEREZ, JR.  
Health Officer  
Ext. 268

KELLY LOMBARDI  
Registrar of Vital  
Statistics/Health Dept.  
Secretary  
Ext. 261

CONNOR LUIME  
Health Department Secretary  
Ext. 266

OFFICE PHONE:  
973-625-8300 Ext 261

# TOWNSHIP OF DENVILLE

## DEPARTMENT OF HEALTH



LAURA DECKER  
Registered Environmental  
Health Specialist-  
Asst. Health Dept. Supervisor  
Ext. 260

CINDIE BELLA  
Public Health Nurse Supervisor  
Ext. 264

AMY LAUDATI  
Health Department Assistant  
Ext. 270

OFFICE FAX:  
973-627-8371

### Outdoor Dining Application Local Emergency Order 4-2020

Please print legibly and complete the application in full with the required supporting documentation as indicated in Local Emergency Order 4-2020. All applicants must submit a map detailing the location, number of tables/chairs and seating capacity of the outdoor dining space. All maps/plans must comply with EO-150 and supplementary regulations as detailed in the NJ Department of Health's *Executive Directive No. 20-014* and the NJ Department of Law and Public Safety Division of Alcohol Beverage Control *Special Ruling 2020-10*. A signed letter of permission from the property owner and/or adjacent business must be submitted in the event the applicant does not own the property where tables will be placed. There shall be no cost associated with this application. Incomplete applications and/or applications missing required documentation shall be returned to the applicant and shall not be processed.

Date of Application: \_\_\_\_\_ Indoor Public Restroom: Yes / No  
(Circle One)

Full Legal Name of Applicant: \_\_\_\_\_

Mailing Address of Applicant: \_\_\_\_\_

Telephone Number of Applicant: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name of Food Establishment: \_\_\_\_\_

Address of Establishment: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address of Property Owner: \_\_\_\_\_

**By signing below, all applicants agree to comply with all provisions of your retail food establishment license, EO-150, Local Emergency Order 4-2020, NJ DOH Executive Order 20-014, all other Municipal Ordinances and where applicable NJ Department of Law and Public Safety Division of Alcoholic Beverage Control Special Ruling 2020-10. Failure to do so may result in potential fines, penalties and the revocation of your outdoor dining permit.**

\_\_\_\_\_  
Printed Name of Applicant

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

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### OUTDOOR DINING APPLICATION – PAGE 2

Name of Food Establishment: \_\_\_\_\_

Address of Establishment: \_\_\_\_\_

### HOLD HARMLESS AND INDEMNIFICATION STATEMENT

\_\_\_\_\_ agrees to save and hold harmless the Township of Denville, its  
(Legal Owner of Establishment)

departments, agencies, boards, commissions, officers, officials, agents, servants, administrators, and  
employees ("indemnities") from and against any and all liability arising out of operation of a sidewalk  
café, whether such liability is direct or vicarious. \_\_\_\_\_ further agrees  
(Legal Owner of Establishment)

to indemnify and hold harmless any and all "indemnities" for their negligence, regardless of whether  
such negligence is responsible wholly or in part for the damages suffered. This provision shall be  
construed as broadly in favor of indemnification as permitted New Jersey law.

\_\_\_\_\_  
Printed Name of Owner of Establishment

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner of Establishment

NOTE: General liability policy copy must be submitted  
naming Township as a named insured (>\$1,000,000)

### For Office Use Only

Submitted: Plan \_\_\_\_\_ Insurance \_\_\_\_\_ Letter of Permission \_\_\_\_\_

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

Date Approved: \_\_\_\_\_ Processed By: \_\_\_\_\_ License No.: \_\_\_\_\_