#### **BOARD OF SELECTMEN**

TOWN HALL • 525 WASHINGTON STREET • WELLESLEY, MA 02482-5992

TELEPHONE: (781) 431-1019 EXT 2219 FACSIMILE: (781) 239-1043

# TEMPORARY OUTDOOR SEATING PERMIT APPLICATION:

This guidance is a step-by-step instruction manual if you would like to use land adjacent to your restaurant to allow for outdoor dining to increase business activity and revenues in a safe and responsible way during the COVID-19 pandemic. We understand that this is a challenging time and are open to creative proposals as long as they are thoughtfully prepared and complete. We intend to partner with our restaurants to refine the proposals – thank you for your flexibility and patience as we approach this next phase.

This application will be submitted to <a href="mailto:cmeagher@wellesleyma.gov">cmeagher@wellesleyma.gov</a> in the Selectman's Office. She will share your application with the following Town agencies:

Health Department, Planning Department, Building Department, Police and Fire Departments

For additional information regarding COVID safety and sector-specific guidance for reopening, go to: <a href="https://www.mass.gov/info-details/reopening-massachusetts">https://www.mass.gov/info-details/reopening-massachusetts</a>

#### **REQUIRED DOCUMENTS**

- I. **Basic Information** fill out the attached form and include it with your submittal.
- II. **Letter of Permission**, if applicable If the space is not owned by the restaurant, submit a letter of permission from the owner of the space indicating permission to use it for outdoor dining.
- III. Letter(s) of Acknowledgement, if applicable If other businesses and/or residents share the use of the space, submit letter(s) of acknowledgement of this plan from all other users.
- IV. **Plan** submit a drawing showing the space you would like to use for outdoor dining that includes the following information:
  - a. Outdoor site plan showing entry/exit points for your establishment.
  - b. Dimensions of the entire outdoor space.
  - c. Dimensions of the portion of space to be used for outdoor dining. Include the number of spaces that will be used for dining.
  - d. Layout of tables and chairs.
    - NOTE: Tables must be 6' apart to facilitate social distancing.

      Patrons must be seated; eat-in service to standing customers is prohibited.
  - e. Dimensions of tables.
  - f. Photo or description of barriers to be used to prevent access from public walkway and/or protect diners from vehicular traffic.

- g. Plan for tenting, if applicable. Tents must be approved by the Building Department. Contact Michael Grant at <a href="mailto:mgrant@wellesleyma.gov">mgrant@wellesleyma.gov</a> for tent permitting information. NOTE: At least 50% of the perimeter of any tent space must remain open and unobstructed by any form of siding or barriers at all times.
- h. ADA compliance plan.
- i. Plan for noise mitigation.
- V. Trash Management Plan
- VI. Take-out/Delivery Alternatives
  - a. Reduce high-traffic entry points by considering a curbside-only delivery plan
  - b. Separate patrons queuing for take-out from outdoor seating area
- VII. **Outdoor Dining COVID-19 Safety Protocol Plan** fill out the attached form and include it with your submittal
- VIII. **Outdoor Dining COVID-19 Safety Protocol Affidavit** review the attached affidavit and include the signed document with your submittal.

### **Responsibilities of the Restaurant**

The restaurant, through its owner and/or manager, is responsible for the following as it pertains to the use of the outdoor dining space:

- 1. Adherence to the plans and documents submitted, reviewed, and approved;
- 2. Procurement of tables, chairs, disinfecting stations, and any other physical items that will be used in the outdoor dining area;
- 3. Procurement and installation of temporary safety barriers to protect diners; and
- 4. Provide evidence of liability insurance to the Town covering the new temporary outdoor dining space.

#### Rights of the Town of Wellesley

The Town of Wellesley reserves the right to revoke its permission to allow the use of the temporary outdoor dining for the following reasons:

- 1. The operation of the outdoor dining area is not in compliance with submitted safety protocols;
- 2. The Health Department, Chief of Police, and/or any agent of the Town determine that the operation of the outdoor dining area is negatively impacting public health and safety.

# **BASIC INFORMATION**

1.	business name.							
2.	Business address:							
3.	Business phone number:							
4.	Owner/manager:							
5.	Owner/manager email address:							
6.	24-hour emergency contact number (In case of issues outside of normal business hours):							
7.	Business hours of <b>outdoor</b> operation:							
8. Who owns the space you are intending to use?  If the business owner is not the owner of the space, submit a letter from the owner auth the use of the lot by the restaurant.								
	If the restaurant is not the only user of the space, the other users of the lot must indicate their knowledge and support of the use of the lot for outdoor dining by submitting signed acknowledgement of the restaurant's plans.							
10.	How many tables and chairs would you like to put in the outdoor dining area?							
11.	Will you be serving alcohol in the outdoor dining area? YES NO							
	If YES, contact <a href="mailto:cmeagher@wellesleyma.gov">cmeagher@wellesleyma.gov</a> in the Selectman's Office regarding the process to extend your premises to allow the sale and consumption of alcohol in the outdoor dining area.							
12.	Will you be using a tent?							
	If YES, contact Michael Grant <a href="mgrant@wellesleyma.gov">mgrant@wellesleyma.gov</a> in the Building Department for tent permit requirements. NOTE: At least 50% of the perimeter of any tent space must							

remain open and unobstructed by any form of siding or barriers at all times.

# **OUTDOOR DINING COVID-19 SAFETY PROTOCOL PLAN**

I. Social Distancing. Check the boxes to certify that you have:								
	Ensured that all persons, including employees and customers in the outdoor dining area, remain at least six feet apart to the greatest extent possible.							
		Established protocols to ensudistancing.	re that employees can p	ractice adequate physical				
		Posted signage for safe physic	cal distancing.					
		Required face coverings or m	asks for all employees th	at cover their mouth and nose.				
II.	Hygiene Protocols. Check the boxes to certify that you have:							
		Provided hand washing capak	oilities throughout the wo	orkplace.				
		Ensured frequent hand washi	ing by employees and pro	ovided adequate supplies to do so.				
		Provided regular sanitization screens, tables and chairs, pe	_					
		Implemented additional proc						
III.	Staffi	ing and Operations. Check the	boxes to certify that you	have:				
		Provided training for employe	ees regarding the social d	istancing and hygiene protocols.				
		Ensured employees who are	displaying COVID-19-like	symptoms do not report to work.				
		Implemented additional proc	edures. Please describe	them here:				
IV.	Clean	ning and Disinfecting. Check the	boxes to certify that you	ı have:				
		Established and maintained c	leaning protocols specific	to the outdoor dining area.				
		Ensured that when an active disinfecting is performed	employee is diagnosed w	ith COVID-19, cleaning and				
		Prepared to disinfect all comm	mon surfaces at intervals	appropriate to said workplace.				
		Implemented additional proc	edures. Please describe t	hem here:				
Signa	ture of	Owner/Manager	Print Name	Date				

# AFFIDAVIT OUTDOOR DINING COVID-19 SAFETY PROTOCOL

l,	_ (write r	name)	being	the	owner	or	manage	r of
	(	name	of	rest	taurant	:)	located	at
	_ Wellesle	ey, M	1A, acl	knowl	edge	and	accept	the
responsibilities of maintaining a clean and safe o	utdoor dir	ning e	xperier	ice fo	r guest	ts an	d for sta	ff in
the outdoor dining area through the diligent a	dherence	to th	ne Outo	door	Dining	COV	/ID-19 Sa	fety
Protocol Plan submitted along with any and all m	andatory	state	safety	stand	ards fo	r wc	rkplaces	and
outdoor dining.								
	_							
Signature of applicant			Date					
Print Name	_							