



Community Development Department – Planning Division
 10770 West Oakland Park Boulevard, Sunrise, FL 33351
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 AskZoning@sunrisefl.gov

For Official Use Only

Date: _____

No.: _____

Intake : _____

Entered By: _____

Outdoor Restaurant Seating Renewal Application

Business Name: _____

Business Location (Address): _____
 Sunrise, Florida _____ (zip code)

Business Mailing Address: _____

Contact Name: _____

Telephone No.: _____ Cell No: _____ Fax No.: _____

Email Address: _____

Original License Approval Date: _____ Permit No.: _____

1. Describe any change in use of the outdoor seating area since the last application was issued. If none, write “no change” in the space provided below.

2. Describe any change in ownership and/or management personnel of the facility since the last outdoor seating application was issued. If none, write “no change” in the space provided below.

3. I understand that an inspection will be scheduled as part of this application. At that time I will provide evidence of:

Valid business tax receipt,

Alcohol beverage license

Proof of Liability Insurance

Compliance with conditions outdoor restaurant and permit

4. Include a check for the application renewal review fee of \$105.00 made out to The City of Sunrise or pay in person by cash or credit card (Visa, MasterCard or Discover).

By signing this Outdoor Seating Application Renewal form I attest that all information contained herein is true.

Business Name

Sign Name

Date

Print Name of person authorized to sign for Business

Title