



## Town of Stoneham – Liquor Licensing Authority Application for Outdoor Seating

Extension of On-Premises License Pursuant to Order  
Clarifying the Progression of the Commonwealth’s Phased  
Workplace Re-Opening Plan and Authorizing Certain Re-  
Opening Preparations at Phase II Workplaces Dated 6/1/20

**Submit application to the Select Board’s office by emailing Dava Kilbride at  
[dkilbride@stoneham-ma.gov](mailto:dkilbride@stoneham-ma.gov)**

**Please note that all permits issued as part of the Phase II Re-Opening Plan will expire on 11/1/20 or the date on which the Governor’s Order is rescinded, whichever is sooner. All applicants must comply with Phase II Sector-Specific Rules or such other and further rules as may be issued by the Governor. All outdoor seating must close by \_\_\_\_\_ p.m. Please note that the Select Board must issue your permit and file a copy with the Town Clerk prior to the opening your outdoor seating area. A copy of the Permit shall be on display at the Premises. Applications will be processed on a rolling basis and inspections will be made in a timely manner.**

*Applicant information*

ABCC License Number: \_\_\_\_\_

Name/Address of Establishment: \_\_\_\_\_

Name of Owner/Manager: \_\_\_\_\_

Manager’s Telephone (24-hour contact): \_\_\_\_\_

Manager’s Email address: \_\_\_\_\_

*Seating information*

Description of outdoor seating and service area (include accurate dimensions, seating capacity/maximum, describe any outdoor food/beverage service stations, provide a drawing or photograph of described area): \_\_\_\_\_

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Is the area described contiguous to the licensed establishment?    Yes            No

Describe and provide documentation detailing the legal arrangement with the owner of the property on which the licensee wishes to have outdoor service (i.e. owner, tenant, licensee):

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Describe fencing/barriers/dividers that will be used to allow and/or prevent general access and provide patron safety and tables that will be used (all Federal and State guidelines must be adhered to):

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Describe the number and type of personnel assigned to the area to assist with seating and service: \_\_\_\_\_

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Describe alternative parking availability/product loading if establishment lot is being utilized for outdoor seating: \_\_\_\_\_

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Will you be using additional signage? Please describe type and location: \_\_\_\_\_

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Approvals:

BOH Agent:

Police Chief:

Building Inspector:

Notes and Comments: \_\_\_\_\_

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