



DEPARTMENT OF LAND USE AND DEVELOPMENT

TEMPORARY OUTDOOR DINING REQUEST – COVID-19 RELIEF POLICY

In accordance with the State of Illinois Reopening Plan, Phase 3, the City of Fairview Heights will allow for the temporary expansion of outdoor dining. All restaurants must adhere to the recommendations and requirements of the Illinois Governor's Office, Illinois Department of Public Health, and the CDC.

Submit one completed application to riganti@cofh.org or mail/drop off at City of Fairview Heights, 10025 Bunkum Road, Fairview Heights, Illinois 62208. All applications will be reviewed within 72 hours of receipt of permit.

No fee is required.

Contact: for questions regarding the permit process or requirements, contact the Andrea Riganti, Director of Land Use and Development at riganti@cofh.org or (618) 489-2060.

Expiration: Approved Temporary Outdoor Dining Requests are valid during the Phase 3 of the State of Illinois Reopening Plan – Restore Illinois. The outdoor dining area will be inspected bi-weekly for compliance.

GENERAL REQUIREMENTS

Occupancy: Temporary outdoor dining cannot result in a total occupancy greater than the originally approved occupancy limit for the restaurant.

Permitted locations: Public sidewalks or private sidewalks provided that the entrance to the restaurant is not blocked. Parking lots may be used. All restaurants with private parking may utilize up to 50% of the required parking for the restaurant space. If restaurant is located within a retail center, the space available to expand the use will be 50% of the required parking for the restaurant space (not the total retail center square footage). An approved temporary barrier must be in place to define the outdoor seating area.

ADA Requirements: All temporary outdoor dining must be ADA accessible.

Traffic: Temporary outdoor dining cannot interfere with normal vehicle traffic movement including fire department access to the building and access to fire hydrants and other firefighting equipment.

Tents: All tents must be tied down properly. All tents must be installed per manufacture's requirements and inspected by the City. Smoking is prohibited under tents and shade structures. Tents in excess of 700 square feet will require inspection by the Fairview-Caseyville Fire District.

Alcohol and Liquor Sales: Restaurants possessing a valid liquor license for on-site consumption shall be allowed to serve alcoholic beverages in the expanded outdoor seating areas.

Operations and Public Safety: Restaurants must follow the attached guidance issued by the Illinois Department of Commerce and Economic Opportunity on May 24, 2020. The City reserves the right to amend this guidance or modify to accommodate a specific restaurant.

APPLICATION AND REQUIRED DOCUMENTS

Attach a copy of a site plan, drawing, or aerial depicting the location of the proposed outdoor dining area. This should also include the location and number of tables and chairs; location, number and size of any proposed tents; and location and type of protective barriers.

APPLICANT INFORMATION

Applicant: _____

Phone and E-Mail: _____

Business Name & Address: _____

Approved Indoor Occupancy: _____

Proposed Outdoor Occupancy: _____

PROPERTY OWNER INFORMATION

Property Owner(s): _____

Mailing Address: _____

Phone: _____

E-Mail: _____

PROPERTY OWNER CONSENT

I, _____, hereby authorize _____ to submit a request for Temporary Outdoor Dining on my property locations at _____

I understand that the applicant is responsible for complying with all applicable Federal, State and City codes failure to comply will result in revocation of the request.

Signature of Property Owner: _____

APPLICANT ACKNOWLEDGEMENT

I hereby certify that the **temporary outdoor dining** described herein will be setup and/or used in accordance with all applicable codes of the State of Illinois and City of Fairview Heights. Further, Applicant states and understands that if a violation of any regulation associated with this application occurs, the approval may become void and may not be reissued for the same location.

Applicant Name: _____

Applicant Signature: _____