

**CITY OF WEST POINT, GEORGIA
Planning and Zoning Department**



Post Office Box 487
West Point, Georgia 31833
Office (706) 645-2226
Fax (706) 643-8150

Sidewalk Café Permit

Name of Applicant _____
Business Address _____
Business Telephone _____
Business Owner (If different from Applicant) _____
Mailing Address _____
City of West Point Business License# _____
Alcohol License (s) # (if applicable) _____, _____, _____
Zoning Classification _____

- Detail sketch drawn to scale identifying the perimeter area, the dimensions of area, the dimensions from perimeter to curb or nearest obstacle, and the design and materials of the required café railing system.
- A \$ 100.00 review fee payable to the City Of West Point, of which no part is refundable to the applicant.
- Copy of current of certificate of insurance as outlined in section 6-10-9 of ordinance.

I (We) do hereby certify the information provided herein is both complete and accurate to the best of my (our) knowledge, and I (we) understand any inaccuracies may be considered just cause for invalidation of this application and any action taken on this application.

Signature of Applicant

Date

FOR OFFICIAL USE ONLY	
DATE OF FILING: _____	APPROVAL DATE: _____
REVIEW FEE: _____	