

City of La Crosse Outdoor Café Restaurant Recovery Program

Permit Application & Instructions

The City of La Crosse has created the following Outdoor Cafe program to temporarily allow restaurants, taverns, and tasting rooms to expand their business footprint onto adjacent: public rights-of-way or privately-owned parking facilities or outdoor space if approved by the City of La Crosse. For eligible restaurants, taverns, and tasting rooms this may also include expanded alcohol license premises. All additional fees will be waived for this program.

All administrative approvals are strictly temporary and expire on **November 13, 2020**. This program may be extended beyond this date upon approval by the Common Council. This program is subject to all local, State and Federal Health Orders, laws and guidelines.

Application Review Process

The Planning and Development Department will be administering the application process for this program. Depending on the type of Outdoor Café that is being applied for, or if a Liquor License Expansion is also being requested, additional approvals may be needed by the Board of Public Works, the City Clerk’s Department, and/or the Common Council.

Completed Applications and the required attachments may be submitted to the Planning and Development Department via electronically to:

Jack Zabrowski
zabrowskij@cityoflacrosse.org

or

Tim Acklin, AICP
acklint@cityoflacrosse.org

Completed Applications and the required attachments may also be mailed or drop off to the Planning and Development Department at 400 La Crosse St, La Crosse, WI 54601. If City Hall is closed to the public applications may be dropped off in the metal drop box located on the north side of City Hall.

IT IS HIGHLY RECOMMENDED THAT APPLICATIONS ARE SUBMITTED ELECTRONICALLY. THIS WILL ENSURE A QUICKER PROCESS OF REVIEW.

If your application requires review by the Board of Public Works for a Street Privilege Permit, applications must be submitted to the Planning & Development Department no later than 5pm on Wednesday to ensure review and action on your application by the following Monday meeting of the Board of Public Works.

Existing Liquor License Expansion requests will be reviewed by the City Clerk’s Department. If review is required by the Board of Public Works Department, and the application is approved, applications will then be forwarded to the Clerk’s Department for review. Provisional approval may be granted until final action is taken by the Common Council at their next meeting.

Signature Chris M Roderique Date August 5,2020
Signature may be typed if completing electronically

Application Submittal Checklist

Each application will need the following in order to be considered a complete application and be processed and reviewed:

- 1) A completed and signed application. (EACH PAGE MUST BE SIGNED AND DATED)
- 2) If the applicant is not the owner of the building/property they must attach acknowledgment from the building/property owner that they are aware of this application being submitted to the City.
- 3) A detailed site plan (drawn by hand or drawn electronically) illustrating the following:
 - a. The location and dimensions of the proposed outdoor seating area in relationship to the building
 - b. The location of property lines and the outdoor seating area.
 - c. Parking lot and driveway locations as well as impact on parking spaces.
 - d. The number of tables/seats and the distances between them.
 - e. Location of fencing. Include description of type and materials.
- 4) Proof of insurance. (The applicant for a permit to encroach on the public right-of-way shall procure and maintain for the duration of the permit a minimum liability and contractual liability policy in the amount of \$100,000.00 each person, \$300,000.00 each accident for bodily injury and \$100,000.00 for property damage. A certificate of such insurance shall be filed with the City Attorney as part of the application. The insurance shall name the City, its officials, employees and agents as additional insureds. The Board of Public Works may require greater insurance protection on a case-by-case basis.)
- 5) Photos, attachments, and/or renderings or any other information that will help the City better understand, review and process your application.
- 6) (OPTIONAL) manufacturer's brochures showing types of tables and seating are helpful and recommended.

IMPORTANT PROGRAM INFORMATION:(Refer to the Program Guidelines for more information)

- 1) The applicant acknowledges that this is a **temporary approval** for outdoor seating and that it will expire/sunset on November 13, 2020, unless approved by the Common Council to extend the program.
- 2) The applicant acknowledges that **non-compliance** with the required standards, rules, requirements of the program and other existing City Ordinances **will result in immediate revocation of your Outdoor Café Permit.**
- 3) The applicant acknowledges that they have inspected the Right-of-Way at issue and determined it to be suitable for their needs and accept it "as is" and waive any claims against the City.
- 4) La Crosse Outdoor Café areas may be required to be fenced under this program. Please refer to the program guidelines. Fence or barrier height shall be a minimum of at least 32" in height.
- 5) Access to the La Crosse Outdoor Café area should, where possible, be made from the main entrance of the building (rather than accessible directly from outside).

Signature Chris M Roderique Date August 5,2020
Signature may be typed if completing electronically

IMPORTANT PROGRAM INFORMATION CONTINUED:(Refer to the Program Guidelines for more information)

- 6) La Crosse Outdoor Café outdoor seating areas should have an emergency exit that meets applicable fire codes.
- 7) Per Section 2-292 of the Municipal Code those businesses wanting to participate in this program will not permitted to do so if any money or debt is owed to the City.
- 8) Under no circumstances is this program intended to promote gatherings or social spaces. It is intended to allow food & beverage patrons to be seated in accordance with physical distancing requirements to increase capacity. Tables shall be separated by at least 6' and should be set for groups no larger than six.
- 9) In no way can the overall capacity (inside + outside) exceed the establishment's overall permitted occupancy. No vertical drinking is allowed.
- 10) No vertical drinking or standing will be allowed in any version or part of this program, non-compliance will result in immediate revocation of your Outdoor Café Permit.
- 11) The applicant has inspected the right-of-way (ROW) at issue and determined it to be suitable for their needs and accept it "as is" and waive any claims against the City.
- 12) The Planning & Development Department or the Board of Public Works may suspend or revoke any permit issued hereunder and order the removal of any encroachment placed in the right-of-way upon ten days' notice. The permit holder shall have a reasonable time, not to exceed five days, in which to file a written request with the City Planning and Development Department to be heard in said manner, and show cause why the proposed actions should not be taken. However, an encroachment may be removed without prior notice or opportunity to be heard where it constitutes an immediate danger in the public health, safety or welfare, where it is not in conformance with representations made in the application, where the certificate of insurance has expired or where placed within any right-of-way without a permit or contrary to the provisions of the permit or this article. In such cases, an opportunity for a post-removal hearing shall be provided.
- 13) Applicant will be required to remove any snow from their approved outdoor dining area.
- 14) Hours of Operation for the Outdoor Café is only permitted between the hours of 7am-11pm.
- 15) Propane tanks are not allowed to be stored within the building or within 10ft of an entrance door to the Building. Must be installed per Fire Code.

Questions on this process may be directed to the Planning and Development Department

Tim Acklin, AICP
acklint@cityoflacrosse.org
608-789-7391

Jack Zabrowski
zabrowskij@cityoflacrosse.org
608-789-8676

Signature Chris M Roderique Date August 5,2020
Signature may be typed if completing electronically

Application

ESTABLISHMENT AND OWNER INFORMATION

Business Name Piggy's Restaurant and Lounge

Business Address
501 Front St South La Crosse WI 54601

Name of Business Owner (LLC, Corp, etc) R&R Restaurants Inc

Phone Number 608-784-4877 Email chris@piggys.com

Name of Property Owner (if different than above) _____

Phone Number _____ Email _____

Does this business currently hold a City of La Crosse liquor license? Yes

If yes, answer questions below. If no, skip to CHOOSE TYPE OF OUTDOOR CAFÉ.

If YES answered above, will you be requesting an expansion of premises to the current Liquor License?
(Requires provisional approval by the City Clerk and approval by the Common Council)

YES NO (If NO skip to CHOOSE TYPE OF OUTDOOR CAFÉ)

Please specify how you want to expand your current Liquor License.

Into adjacent Right-of-Way (public sidewalk, on-street parking spaces, street, public plazas)

Into existing business or adjacent off-street parking lot or open space.

CHOOSE TYPE OF OUTDOOR CAFÉ (see program guide for definitions)

Street Café (Requires Board of Public Works Approval of a Street Privilege Permit)

Sidewalk Café (Requires Board of Public Works Approval of a Street Privilege Permit)

Urban City Plaza (Requires Board of Public Works Approval of a Street Privilege Permit)

Café Zone (Requires Board of Public Works Approval of a Street Privilege Permit)

Outdoor Dining on Adjacent Private Parking Lot or Outdoor Space

SITE/PROJECT DESCRIPTION

Please describe the proposed outdoor seating area details below.

Number of tables in proposed outdoor seating area: 9 (nine) (6 6' Rectangle and 3 5' Round)

Number of seats in proposed outdoor seating area: 30 (fourty)

Existing inside seating capacity: 470

Your existing building capacity will apply across ALL seating areas through the use of this permit.

Number of bathroom fixtures: 16 (sixteen)

Number of onsite, off-street parking spaces for your business currently: 80 (eighty)

PERMIT FEES

There are no fees for this application.

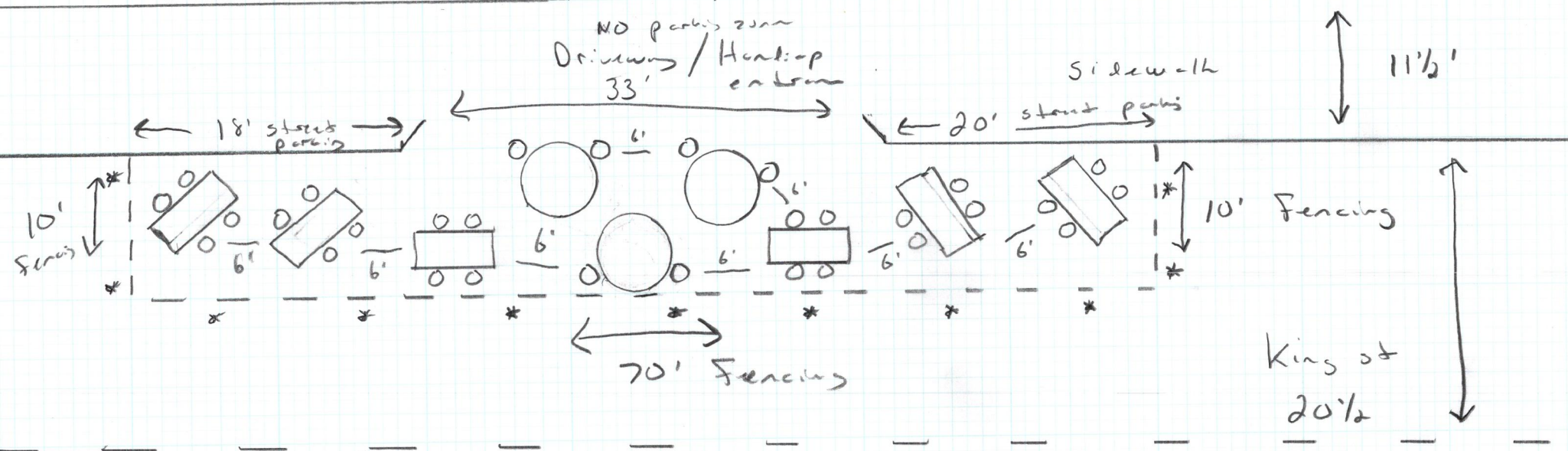
APPLICANT SIGNATURE

I hereby make an application for an Outdoor Café Permit as detailed above. I agree to abide by the requirements of all City ordinances and State laws. I understand that the approval of a La Crosse Outdoor Café Restaurant Recovery Area Permit is conditional and that the permit can be revoked or suspended at any time. I agree to apply for any and all building permits that may be needed in the construction of this La Crosse Outdoor Café Restaurant Recovery Area.

Signature Chris M Roderique Date August 5,2020

Signature may be typed if completing electronically

Approx 114' ← to Alley
 Piggy's
 Approx 171' → to Front Str
 Front Doors 10'



Piggy's- 501 Front Street
 Street Cafe on King Street
 10' x 70' area on north side of building

King Street

King st
 20 1/2
 to Center Line
 from curb

Fencing to be coral style
 inter-locking steel sections

* = Condu stick cone
 6' = 6' at least between
 chairs + guests





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/14/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Coverra Insurance Services, Inc. 3803 Creekside Ln Holmen WI 54636	CONTACT NAME: Pam Andre PHONE (A/C No. Ext): 608-526-2127 E-MAIL ADDRESS: pandre@coverrainurance.com	FAX (A/C, No): 608-519-2818
	INSURER(S) AFFORDING COVERAGE	
INSURED CTR Investments LLC & R&R Restaurant Inc dba Piggy 501 S Front St La Crosse WI 54601	INSURER A: Society Insurance	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER: [REDACTED]

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			[REDACTED]	11/19/2019	11/19/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			[REDACTED]	11/19/2019	11/19/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			[REDACTED]	11/19/2019	11/19/2020	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	[REDACTED]	11/19/2019	11/19/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The City of La Crosse is listed as an additional insured on the General Liability policy

CERTIFICATE HOLDER**CANCELLATION**
 City of La Crosse
 400 La Crosse Street
 La Crosse WI 54601

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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