WP Sidewalk Sale Permit APPLICATION & CHECKLIST



Merchants located within downtown Winter Park that would like to extend their services outdoors Friday, July 4, 2025, through Sunday, July 6, 2025, must fill out this application.

Applications MUST be submitted by Friday, June 27, 2025.

Applications must be submitted to mrcp@cityofwinterpark.org

EFFECTIVE DATES OF PERMIT

Beginning Friday, July 4, 2025, at 9am and ending Sunday, July 8, 2025, at 6pm.

RESTRICTIONS

This application does not permit any business to cook or utilize any cooking equipment outdoors, nor does it allow any food trucks to be permitted outside of businesses that are not already permitted and licensed with The City of Winter Park.

The following documents must be submitted with this application. Incorrect or missing information can delay, or deny your application. The applicant may not add seating capacity to their business until this permit has been approve and issued. For questions, please

It is the responsibility of the individual businesses to maintain appropriate health and safety standards for their customers.

APPLICATION TYPE

Temporary Outdoor Retail Sales Within City of Winter Park Right-of-Way (on city-owned property)

APPLICATION CHECKLIST

Business Owner Phone & Email Address

and we are amail at mran@aityofwintarnark ard

send us an email at <u>inrepectiyorwinterpark.org</u>				
Diagram of proposed retail sales layout. The diagram must also depict any sidewalks, steps, planters, umbrellas, location of doorways, location of trees, bus shelters, emergency vehicle lanes, sidewalk benches, trash receptacles, fire hydrants, signs, news racks and any other obstruction either existing or proposed.				
You must attach a drawing (to scale) that clearly states the total reach and items to be sold.	number of racks or	tables, as well a	s the distances between	
BUSINESS INFORMATION				
Name of Business (DBA)				
Business Site Address	CITY	STATE	ZIP CODE	
Business Email Address		OTATE	Zii GGSE	_
BUSINESS OWNER/MANAGER INFORMAT	ΓΙΟΝ			
Business Owner/Manager Name				

PROPERTY OWNER INFORMATION (if different than applicant) Owner Name Owner Address ____ CITY STREET STATE ZIP CODE Owner Phone & Email Address _____ REQUESTED INFORMATION Total no. of proposed outdoor tables _____ Total no. of proposed outdoor racks _____ By signing below, I hereby certify that the foregoing statements are true and correct to the best of my knowledge. I acknowledge receipt of the instructions sheets issued by the City of Winter Park regarding this application. I acknowledge that this business is governed by the City of Winter Park Code and I am responsible for becoming familiar with the code and abiding by its requirements. I understand that I must receive approval of this form before placing any additional tables, seats, or racks outside of my business. I also understand that The City of Winter Park may require me to modify my layout, including during the event.

Print name

Date

Applicant signature