

City of Streator
204 S. Bloomington Street
Streator, Illinois 61364
815/672-2517 fax 815/672-7566



PETITION FOR A TEMPORARY OUTDOOR SEATING PERMIT

Petitioner(s): _____ Telephone: _____

Mailing Address: _____ Fax: _____

Petitioner's Representative: _____ Telephone: _____

Mailing Address: _____ Fax: _____

1. No application fee is required. Please submit along with this application the following:
 - A site plan clearly marking the proposed outdoor seating and surrounding area detailing proposed fencing/barrier, existing sidewalks, curbs, and roadways and pedestrian routes and widths around the outdoor seating area.

2. The petitioner petitions the City of Streator for a special use permit for the following property:
 - a. Street Address or Common Location: _____
 - b. Yes No Will alcoholic beverages be served in the sidewalk cafe?
 - c. Proposed hours of operation. _____
 - d. Describe any impact on the surrounding property, uses, and occupants.

 - h. Describe any impact on pedestrian and vehicular traffic.

 - i. Yes No Does the applicant affirm that it is aware of and will abide by all County and State Department of Health rules and regulations?

3. The petitioner(s) have read and completed all of the above information and affirm that it is true and correct.

Petitioner's Signature: _____ Date: _____

Petitioner's Signature: _____ Date: _____

4. I hereby affirm that I am the legal owner (or authorized agent or representative- proof attached) of the subject property and authorize the petitioner to pursue this petition as described above.

Owner's Signature: _____ Date: _____

Owner's Signature: _____ Date: _____

Rev: 5/22/2020