



**City of Streator**  
**204 South Bloomington Street**  
**Streator, Illinois 61364**  
**Phone: (815) 672-2517**  
**Fax: (815) 672-7566**

**Fee: \$100 Annually**

## PETITION FOR SIDEWALK CAFÉ PERMIT

Petitioner(s): \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Petitioner's Representative: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Fax: \_\_\_\_\_

1. Application fee is \$100.00 annually unless waived by the City Council. Please submit along with this application the following:

- A site plan clearly marking the proposed sidewalk café and surrounding area detailing proposed fencing/barrier, existing sidewalks, curbs, and roadways and pedestrian routes and widths around the café.
- A certificate of liability insurance listing the City of Streator as additionally insured with a minimum liability coverage limit of \$500,000.

2. The Petitioner petitions the City of Streator for a special use permit for the following property:

a. Legal Description (attach the full legal description on 8 ½ x 11 separate sheet of paper—type written, plus an electronic version of the legal description).

Subdivision Name: \_\_\_\_\_

Property Tax ID #: \_\_\_\_\_

b. Street Address or Common Location: \_\_\_\_\_

c. Existing Zoning District: \_\_\_\_\_

d. Describe Reason for request: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

e. Will alcoholic beverages be served in the sidewalk cafe?     Yes     No

f. Proposed hours of operation: \_\_\_\_\_

g. Describe any impact on the surrounding property, uses, and occupants: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

h. Describe any impact on pedestrian and/or vehicular traffic: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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: \_\_\_\_\_

Revised 5/22/2020