



APPLICATION

DEPARTMENT OF PLANNING AND ZONING

KING STREET OUTDOOR DINING (KSOD)

STEPS: KSOD PERMIT PROCESS

1. REVIEW THE KING STREET OUTDOOR DINING REGULATIONS AND GUIDELINES

See page two for submission requirements and checklist. See page five for regulations and guidelines.

2. COMPLETE KSOD APPLICATION

See page seven.

3. SUBMIT APPLICATION AND SUPPORTING DOCUMENTS ONLINE

Visit alexandriava.gov/apex and click "Apply" in the navigation bar. In the drop-down menu, under "Permits" select "All." On the next screen, navigate to "King Street Outdoor Dining" and proceed with either step 4a or 4b, below.

4a. RENEWALS WITHOUT CHANGES

Click the blue "Apply" button within the row for "King Street Outdoor Dining Application (Renewal)" and follow the on-screen prompts to submit your application. Staff will review your submission and determine if any additional information is needed. After submission, proceed with setting up your dining area. A zoning inspector will visit the restaurant to verify compliance with KSOD regulations and guidelines.

OR

NEW APPLICATIONS OR RENEWALS WITH CHANGES

Click the blue "Apply" button within the row for "King Street Outdoor Dining Program (New or Amended)" and follow the on-screen prompts to submit your application. Staff will review your submission and determine if any additional information is needed. After submission, staff must perform on-site inspections to verify that the proposed plan complies with KSOD regulations and guidelines.

4b. TRACK YOUR APPLICATION STATUS ONLINE

Staff will update your application status after reviews and inspections have been completed. If action is needed on your part, staff will contact you. Your application status will be updated to show staff approval or disapproval.

5. FUTURE RENEWALS

Your KSOD permit must be renewed annually prior to April 1 after the 2022 season which ends March 31, 2023.

PLEASE SUBMIT:

1. COMPLETED APPLICATION (page four of this packet)

2. PLANS

Provide a plan showing the outdoor dining area. See example on page three. All drawings must be to-scale and include the following:

- Existing façade and immediately adjacent businesses (property lines must be shown; include survey plat or site plan of subject property if available)
- Sidewalk width (building face to curb edge)
- Location of barriers (must be straight and not meander around sidewalk elements)
- Proposed configuration and dimensions of tables, chairs, planters, and umbrellas (minimum 6'8" clearance under umbrella required)
- Sidewalk elements and distance measures to edge of dining area, (sidewalk elements include, but are not limited to, tree wells, lamp posts, fire hydrants, signs, parking meters, light poles, trash receptacles and any other streetscape element) — a straight and continuous five feet of sidewalk is required to be maintained at all times
- Main egress corridor with dimensions (width)
- Location of designated handicapped accessible seating area
- Location of any Fire Department Connections (FDC) on building face
- Location of bus stops
- Restaurant name and address

3. FURNITURE DETAILS

Photos and dimensions of proposed furniture, including tables, umbrellas (minimum 6'8" clearance required under umbrella), chairs, planters, barriers and any other element being proposed to be located on the sidewalk (manufacturer's specification sheets preferred).

4. CERTIFICATE OF INSURANCE (COI)

Current certificate of liability insurance covering outdoor dining operations (with City of Alexandria as additional insured) with minimum \$1,000,000 coverage. See example on page four.

SAMPLE CERTIFICATE OF INSURANCE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UNDER 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 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 _____ _____ _____ _____	CONTACT NAME: _____ PHONE (A/C No.): _____ FAX (A/C No.): _____ E-MAIL: _____ ADDRESS: _____ _____ _____														
INSURED _____ _____ _____ _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: _____</td> <td>_____</td> </tr> <tr> <td>INSURER B: _____</td> <td>_____</td> </tr> <tr> <td>INSURER C: _____</td> <td>_____</td> </tr> <tr> <td>INSURER D: _____</td> <td>_____</td> </tr> <tr> <td>INSURER E: _____</td> <td>_____</td> </tr> <tr> <td>INSURER F: _____</td> <td>_____</td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: _____	_____	INSURER B: _____	_____	INSURER C: _____	_____	INSURER D: _____	_____	INSURER E: _____	_____	INSURER F: _____	_____
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INSURER D: _____	_____														
INSURER E: _____	_____														
INSURER F: _____	_____														

COVERAGES CERTIFICATE NUMBER: 17-18 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	ADOL SUBR (NSD, WOD)	POLICY NUMBER	POLICY EXP (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: _____	X	_____	4/22/2017	4/22/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea. occurrence) \$ 50,000 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 Employee Practice Liability \$ 100,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		_____	4/22/2017	4/22/2018	COMBINED SINGLE LIMIT (Ea. accident) \$ 1,000,000 BODILY INJURY (Per person) \$ _____ BODILY INJURY (Per accident) \$ _____ PROPERTY DAMAGE (Per accident) \$ _____ PIP-Basic \$ 40,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB OCCUR <input type="checkbox"/> CLAIMS-MADE DED _____ RETENTION \$ _____		_____	4/22/2017	4/22/2018	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ _____
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	4/22/2017	4/22/2018	PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

The City of Alexandria, Virginia is named as an additional insured with respect to General Liability.

CERTIFICATE HOLDER The City of Alexandria cannot be listed as a certificate holder unless it is clearly stated the certificate holder is also named as an additional insured	CANCELLATION 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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KSOD REGULATIONS AND GUIDELINES

GENERAL REQUIREMENTS

- The program includes restaurant properties that abut King Street (from the waterfront to the King Street Metro Station) and one block north and south of King Street.
- Restaurants submit an application for a permit, including a dimensional plan for the outside dining area that depicts the location and size of the seating area, and width of the sidewalk. The plan must illustrate the number of chairs, tables, and any other improvements.
- Tables, chairs and umbrellas must comply with the *Outdoor Dining Design Guidelines* to ensure that the design is compatible with the character of the Old and Historic Alexandria District.
- All outdoor dining areas must use some type of “detectible barrier” to make the sidewalk safer for visually impaired pedestrians. Details of types of detectible barriers are shown in the *Outdoor Dining Design Guidelines*. Hours of service for outdoor dining can be anytime between 6:00 a.m. to 11:00 p.m., seven days a week, consistent with any previously approved restaurant hours.

PROGRAM CONDITIONS

- The outside dining area should be attractive and promote pedestrian and retail friendly vitality in the King Street corridor.
- Restaurant owners shall meet the Statewide Building Code requirements for total number of indoor and outdoor seats, egress capacity, number of exits, and the number and type of restroom facilities to make sure that potential overcrowding will not occur.
- The outside dining area shall be located along the frontage of the restaurant and must be under the responsible direction and control of the restaurant. It may be located adjacent to the building or near the curb.
- A minimum of five feet of straight, continuous, and unobstructed corridor space must be maintained past the outside dining area for sidewalk pedestrian traffic in order to ensure a clear pedestrian passageway along the sidewalk. City inspectors will monitor the restaurants to ensure that a five-foot sidewalk width is always maintained.
- At least 44 inches of unobstructed ingress/egress space must be maintained between any restaurant doorway and the pedestrian traffic corridor.
- An unobstructed clearance of five feet must be maintained between a fire hydrant and any furniture or fixtures related to outdoor dining.
- All improvements (furniture and enclosures) used in the outdoor seating area must be temporary in nature. There shall be no penetration of the sidewalk surfaces.
- The outside dining area must be kept neat and clean at all times. It must be free from accumulation of litter, snow, ice, and other potentially dangerous matter. The restaurant must participate in an approved rodent control program.
- No food preparation is permitted in the outside dining area.
- Tents or awnings are not permitted without obtaining necessary permits, separate of this application.
- Table umbrellas are permitted if they do not have signs or advertisements on them

and if the umbrellas are completely contained within the outdoor dining area, even when fully extended. Within the outdoor dining area, the bottom edge of the umbrella must have a minimum vertical clearance of 6' 8" from the sidewalk to allow for patron and server circulation.

- No signs are permitted in the outside dining area except those signs that have a valid City permit.
- Loudspeakers outside are prohibited, and amplified sounds from inside the restaurant must not be audible in the outside dining area.
- Any door leading into a restaurant must not be propped open or otherwise supported in an open position.
- The restaurant must comply with all applicable city, state and federal laws and regulations.
- Outdoor dining is not permitted between the Monday before Thanksgiving and March 31, unless all furniture, including tables, chairs, barriers, umbrellas and other similar items, are removed from the sidewalk and brought indoors daily.
- Smoking is not permitted in the outdoor dining area.



APPLICATION DEPARTMENT OF PLANNING AND ZONING

CHECK ONE:

- RENEWAL OF PREVIOUSLY APPROVED OUTDOOR DINING PERMIT
- NEW APPLICATION OR RENEWAL WITH PROPOSED CHANGES

PROPERTY ADDRESS:

NAME OF RESTAURANT:

ON-SITE CONTACT PERSON:

ON-SITE CONTACT PHONE NUMBER/EMAIL:

TOTAL NUMBER OF PROPOSED OUTDOOR SEATS:

TOTAL SQUARE FOOTAGE OF OUTDOOR DINING AREA:

**BY SIGNING BELOW, I CERTIFY THAT I WILL COMPLY WITH ALL TERMS AND
CONDITIONS OF THE KING STREET OUTDOOR DINING PROGRAM**

Print Name of Applicant

Signature

Mailing/Street Address

Telephone

City and State

ZIP Code

E-mail Address