



Instruction Sheet for Outdoor Restaurant Licenses

Phone: (216) 664-2264

Hours of Operation:
8:00 a.m. to 4:30 p.m. Weekdays

DALLicenses@clevelandohio.gov

Before completing and submitting your application to our office, please read all of the materials and information included. If you have any questions, please call our office at (216) 664-2264 before you apply.

An Outdoor Restaurant License is required anytime a food shop desires to serve food, beverages, and conduct commercial activity outdoors.

This is an annual permit that expires on March 1st.

As the licensee, you are expected to be completely familiar with the requirements of City of Cleveland Codified Ordinance Chapter §241, Food Shops.

WARNING: Knowingly making a false or fraudulent application for a license constitutes grounds for denial, suspension, or revocation.

City of Cleveland employees may not provide legal advice to the public. The information provided below is for informational purposes only and is not legal advice. For questions regarding the application of a city ordinance or regulation, you should consult an attorney regarding your specific situation.

You May Apply for This License In Person, By Mail, or Online

In Person:

1. Gather all supporting documentation that must be submitted along with the application. See the *What to Bring or Submit to the Division of Assessments & Licenses* section below.
2. Complete the application in its entirety and sign it. Print legibly using blue or black ink.
3. Visit our office located at the address in the top right-hand corner between the hours of 8:00 a.m. and 4:30 p.m., Monday through Friday.
4. Bring the fee of \$50.00. Acceptable forms of payment are money orders, checks, debit/credit cards, and cash.

Online:

1. Gather all supporting documentation that must be submitted along with the application. See the *What to Bring or Submit to the Division of Assessments & Licenses* section below.
2. Go to <https://ca.permitcleveland.org/public/Default.aspx>, and follow the instructions on the enclosed attachment.
3. Be prepared to submit the license fee of \$50.00 plus all applicable convenience fees. Acceptable forms of payment are electronic check and debit/credit cards.

By Mail:

1. Gather all supporting documentation that must be submitted along with the application. See the *What to Bring or Submit to the Division of Assessments & Licenses* section below.
2. Make copies of all documentation.
3. Complete the enclosed application in its entirety and sign it. Print legibly using blue or black ink.
4. Mail the completed application, supporting documentation and fee of \$50.00 to the Division of Assessments and Licenses at the address listed above in the top right-hand corner. Acceptable forms of payment for mailed applications are money orders and checks. (DO NOT SEND CASH OR CREDIT CARD INFORMATION THROUGH THE MAIL).



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What to Bring or Submit to the Division of Assessments & Licenses

1. Completed and signed application.
2. A **new sketch of the premises no larger than 8½ x 11 showing the outdoor area where food, beverages, or commercial activity will be conducted.**
3. Fee of \$50.00. Fees are payable by cash, check, or credit card. This fee is non-refundable. Make checks payable to the City of Cleveland.

Please Note the Following

If an outdoor area is located within any portion of a public sidewalk, court, alley, street, or public right-of-way, **each applicant must complete and submit an additional application for a sidewalk permit** under City of Cleveland Codified Ordinance Chapter 513. There is a separate fee associated with this permit.

To request the application and/or ask questions about this permit, please contact the Division of Engineering and Construction at (216) 664-2460. Sidewalk permit applications must be submitted directly to the Division of Engineering and Construction.



CITY OF CLEVELAND
Mayor Justin M. Bibb

Outdoor Restaurant License Application

City of Cleveland
Division of Assessments & Licenses
601 Lakeside Avenue, Room 122
Cleveland, Ohio 44114



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DALLicenses@clevelandohio.gov

Date:	Record Number (internally assigned):
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FEE: \$50.00 (NON-REFUNDABLE)

SECTION A - BUSINESS INFORMATION

Individual or Corporation Name:			
Trade Name:			
Address:			
City:		State:	Zip:
Telephone (including area code):		Email:	
Federal ID or Social Security Number:			Ward #:
Food Service License Number:		Expiration Date:	
Mailing Address (if different than above):			
City:		State:	Zip:
Proposed type of commercial activity:			
Describe the area of the proposed activity:			

SECTION B - APPLICANT INFORMATION

Name:			
Address:			
City:		State:	Zip:
Telephone:		Email:	

SECTION C - DECLARATION

Applicant hereby acknowledges that he/she has read and understands Codified Ordinances §241.21 (Licensing Procedure and Fee) and §241.99 (Penalty) and understands the obligations contained therein.

APPLICANT SIGNATURE

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FOR CDPH USE ONLY

**EITHER APPROVE IN ACCELA OR EMAIL SIGNED APPLICATION TO
DALLICENSES@CLEVELANDOHIO.GOV**

	SIGNATURE	APPROVED	DENIED	DATE
Inspector:				
If denied, please state reasons:				
Director:				
If denied, please state reasons:				