

BOROUGH OF WEST READING CODE ENFORCEMENT DEPARTMENT

500 Chestnut Street, West Reading PA 19611 (610) 374-8273 Fax: (610) 374-8419 E-mail: wrcodes@westreadingborough.org

SIDEWALK CAFÉ PERMIT APPLICATION ORDINANCE 984

Date of Application	1:	Permit Number:
Payment Received:		
Name & Address of Applicant:		
Phone Number:		
Name & Address of Business:		
Phone Number:		
Capacity of existi	ng indoor seating:	
Capacity of propo	osed outdoor dining:	
Proof of Insurance	e:	
Month, days and	hours of intended operation of o	outdoor dining:

A detailed plan showing the design and location of all temporary structures such as tables and chairs:												
			or an	tempo	rary su	ructures	such a	s tables	and cr	iairs:		

Entire property and adjacent properties on the location map with streets for a distance of at least 25 feet:											

Layout:											