Appendix "2 to Bylaw 685, 2011



PO Box 190, #1 Opal Drive Logan Lake, BC VOK 1WO P: 250-523-6225 F: 250-523-6678

www.loganlake.ca

MUNICIPAL RIGHT-OF-WAY USE PERMIT

Issued pursuant to Section 7 of Bylaw 685

Please fill in A, B or C below:		,
A:		
APPLICANT NAME:		DATE:
APPLICANT ADDRESS		
PHONE:	FAX:	CELL:
EMAIL:		
B:		
BUSINESS NAME/OPERATOR:		
BUSINESS ADDRESS:		
PHONE:	FAX:	CELL:
EMAIL:		DISTRICT BUSINESS LICENCE #
C:		
PROPERTY/BUILDING OWNER:		
ADDRESS:		
PHONE:	FAX:	CELL:
EMAIL:		
LOCATION OF PERMITTED USE:		
DATES(S) OF USE:	FROM:	TO:
HOURS OF USE:	FROM:	TO:

DESCRIPTION/PURPOSE: Please attach a sketch showing the dimensions of the area for proposed use which will form part of this permit:

PERMITTED TERMS OF USE: The Permit is non-transferrable. This Permit is issued exclusively for the use of the area of public sidewalk described to place tables, chairs, sun umbrellas and other approved objects. The Permits must be renewed annually by the last business day in January. Sidewalks must at all times remain accessible to wheelchairs and foot traffic and must comply with Occupational Health and Safety Standards. As a condition of being granted a Sidewalk use Permit, the applicant must show "Proof of Liability Insurance", with minimum coverage of \$2,000,000 with the District of Logan Lake named as co-insured. This Permit may be revoked by the Public Works Superintendent in the event that permitted terms of use are not met, and/or any reason deemed necessary to the essential business of the District.

I HEREBY AGREE to the terms stipulated herein and further agree t	PERMISSION IS HEREBY GRANTED to the above applicant by order
indemnify and save harmless the District against any and all claims	, of the Public Works Superintendent.
actions or expenses whatsoever or by whomsoever brought against th	
District by reason of the District granting us this Sidewalk use Permit.	1
further agree to maintain the sidewalk in a neat and tidy condition i	
keeping with a reasonable standard of maintenance prevailing in the	
neighbourhood.	
Signature of Applicant Date	Public Works Superintendent Date
Signature of Business Operator Date	-