

# APPLICATION for DOWNTOWN BUSINESS DISTRICT PERMIT CITY of BOWLING GREEN, OHIO

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Owner Name (Business): \_\_\_\_\_ Owner Name (Building): \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

**\*Please mark each type of annual permit that you are applying for. Permit Fee for Each is \$35.00.\***

\_\_\_\_ A-Frame Sign Permit \_\_\_\_ Outdoor Dining Permit \_\_\_\_ Merchandise Display Permit

## Indemnity Agreement

Print Name Here \_\_\_\_\_ agrees to indemnify, defend and hold the City of Bowling Green and its officials, employees, volunteers, Board and Commission members harmless from and against any and all actual or alleged demands, claims, damages, losses and expenses (whether caused in whole or in part by a party indemnified hereunder) related to A-Frame Signs and Outdoor Dining in conjunction with this application excepting only the sole negligence of the City of Bowling Green.

This indemnity, defense and hold harmless includes but is not limited to: injury to and other claims by advertiser and/or its subcontractors, vendors, suppliers, etc. and claims from all their respective employees, agents, relatives and estates; injury to third parties; damage to and/or loss of use of tangible property; errors or omissions including false or improper advertising; damage to and loss of use of City property; claims by City employees, their relatives or estates; attorney fees and other defense expenses arising out of or related to this Outdoor Dining application.

It is understood and agreed that the insurance requirements for the permit may not be adequate to fully protect the applicant. Any such insurance shortage will be the personal obligation of the applicant and/or its officers and officials.  
Signature \_\_\_\_\_ Date \_\_\_\_\_

*(Business owner/or legal representative must sign and date)*

**I HEREBY AGREE TO THIS INDEMNITY AGREEMENT AND AFFIRM ALL OF THE INFORMATION ATTACHED IS TRUE AND CORRECT. I UNDERSTAND THIS PERMIT EXPIRES EVERY CALENDAR YEAR AND A NEW PERMIT IS REQUIRED EACH YEAR, IF A SIGN OR OUTDOOR DINING WILL BE USED.**

### CITY DEPARTMENTAL REVIEW

Total Fees Due: \$ \_\_\_\_\_ Cash/Check #: \_\_\_\_\_ Receipt #: \_\_\_\_\_ Permit #: \_\_\_\_\_

- Proof of Insurance provided
- Indemnity Agreement signed
- Scaled Sketch attached

Checked By: \_\_\_\_\_

Date: \_\_\_\_\_

Approved or Denied Signature: \_\_\_\_\_ Date: \_\_\_\_\_

MUNICIPAL ADMINISTRATOR

CONDITIONS OF ISSUANCE: \_\_\_\_\_