

**City of Saratoga Springs**  
**Chapter 136 License, needed:**

- \_\_\_\_\_ **Application**
- \_\_\_\_\_ **Floor Plans**-(if new application, or if any changes have been made since last renewal)
- \_\_\_\_\_ **Agreement for sidewalk cafes (Y, N, N/A)** (on the third page)
- \_\_\_\_\_ **Security Guard proof of employer registration with NYS** (if applicable)
- \_\_\_\_\_ **Security Guard proof of employee(s) registration with NYS** (if applicable)
- \_\_\_\_\_ **NYS Liquor License** (if applicable)
- \_\_\_\_\_ **Liquor Liability** (only if a sidewalk cafe application)
- \_\_\_\_\_ **General Liability-**  
(Naming City of Saratoga Springs 474 Broadway Certificate holder,  
and additionally insured on a primary and non-contributory basis)
- \_\_\_\_\_ **Workers Comp---**if no employees, must do waiver
- \_\_\_\_\_ **NYS Disability---**if no employees, must do waiver
- \_\_\_\_\_ **NYS Health Certificate**
- \_\_\_\_\_ **Fire Inspection Fee paid (Y, N)**
- \_\_\_\_\_ **License Fee:**

*\$100.00 Eating and Drinking License*

*\$150.00 Cabaret License*

*\$15.00 Sidewalk Café Application*

*\$50.00 Sidewalk Café License*

<i>Lodging License:</i>	<i>5 rooms or less</i>	<i>\$25.00</i>
	<i>6 – 10 rooms</i>	<i>\$50.00</i>
	<i>11 – 25 rooms</i>	<i>\$75.00</i>
	<i>26 – 100 rooms</i>	<i>\$100.00</i>
	<i>101 rooms or above</i>	<i>\$150.00</i>



**CITY OF SARATOGA SPRINGS**  
**CHAPTER 136 LICENSES**

New Application \_\_\_ Renewal Application \_\_\_ (Original date of application \_\_\_\_\_)

1. Mark each type of license which you are applying for:

Eating and Drinking \_\_\_ Cabaret \_\_\_ Lodging \_\_\_ (# of rooms \_\_\_) Sidewalk Café \_\_\_

2. Name of Business \_\_\_\_\_
3. Business Physical Address \_\_\_\_\_
4. Business Mailing Address \_\_\_\_\_
5. Business Web Address \_\_\_\_\_
6. Business Phone \_\_\_\_\_ Fax Number \_\_\_\_\_ Emergency Cell Phone \_\_\_\_\_
7. Applicant's Name \_\_\_\_\_
8. Applicant's Home Address \_\_\_\_\_
9. Applicant's Home Phone \_\_\_\_\_ Applicant's Date of Birth \_\_\_\_\_
10. Business Owner: \_\_\_\_\_ Email: \_\_\_\_\_ Phone # \_\_\_\_\_
11. Emergency Contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone # \_\_\_\_\_
12. Current Occupation \_\_\_\_\_
13. Applicable Business Experience \_\_\_\_\_
14. Owner of Property \_\_\_\_\_ Property Owner's Phone \_\_\_\_\_
15. Property Owner's Address \_\_\_\_\_
16. Describe, in detail, services provided and the uses of your premises: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. Type of fire protection equipment: **NOT SARATOGA SPRINGS FIRE DEPARTMENT**

Sprinkler System? Yes \_\_\_ No \_\_\_

If yes, last inspection date \_\_\_\_\_ By Who: \_\_\_\_\_

Fire Extinguishers? Yes \_\_\_ No \_\_\_ **How Many?** \_\_\_\_\_

If yes, last inspection date \_\_\_\_\_ By Who: \_\_\_\_\_

Commercial Exhaust Hood? Yes \_\_\_ No \_\_\_

If yes, last inspection date \_\_\_\_\_ By Who: \_\_\_\_\_

Other? \_\_\_\_\_

18. Fire Alarm System? Yes \_\_\_ No \_\_\_ If yes, date last inspected and/or serviced \_\_\_\_\_
19. Expiration date of New York State Department of Health Certificate **or** New York State Department of Agriculture and Markets Food Processing permit. \_\_\_\_\_ (**Please include copy**)
20. Do you have a functional grease trap or grease interceptor? Yes \_\_\_ No \_\_\_ If yes, last service/inspection date: \_\_\_\_\_
21. Does your business use a dumpster? Yes \_\_\_ No \_\_\_ (If yes, contact the Department of Public Safety to obtain the required Dumpster Permit).
22. Does your business have an alarm system? Yes \_\_\_ No \_\_\_ (If yes, you will be required to complete the one time Alarm User Permit).
23. Do you serve alcoholic beverages? Yes \_\_\_ No \_\_\_ If yes, how many bars do you have (include main and satellite)? \_\_\_\_\_  
**If yes, you are required to submit with this application all of your current New York State Liquor Licenses.**
24. Have you made any floor plan changes since your last renewal? Yes \_\_\_ No \_\_\_ If **yes**, please include an updated floor plan.  
**(Floor plan can be as simple as a sketch on an 8x10 piece of paper to show the layout of your establishment.)**

25. Do you employ security guards or hire security guards for your business? Yes \_\_\_\_ No \_\_\_\_

*(If yes, you are required to submit proof with this application that your establishment is registered and licensed with the State of New York Department of State Division of Licensing authorizing you to employ security guards. You must also provide with this application a detailed sketch (attach an additional sheet of paper) of the identifying shirt your business will be using as the security guard uniform, which has to include your business name, as well as five inch lettering, all capital letters, SECURITY across the chest of the front of the shirt, and across the shoulder blades on the back of the shirt. This will be submitted by the City Clerk's Office to the Department of Public Safety for approval. Your security guards are required to wear Public Safety approved identification while employed at your establishment. Within the first five (5) days of employment of each security guard, you will be required to provide the City proof of each security guard's New York State registration)*

26. Describe, in detail, the fixed locations of your security guards: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The City of Saratoga Springs requires:

1. A Certificate of Insurance for Proof of commercial general liability insurance, including personal injury liability insurance, in the amount of One Million Dollars (\$1,000,000) per occurrence and Two Million Dollars (\$2,000,000) aggregate, naming the City of Saratoga Springs as an additional insured. The City shall be included as an additional insured on said insurance for the permit(s) process. The City of Saratoga Springs must be listed as the certificate holder with the physical address of 474 Broadway, Saratoga Springs, NY 12866.
2. Proof of New York State statutory workers' compensation and employer's liability insurance for all employees, or a waiver of same as permitted by law.
3. For sidewalk cafes that serve alcoholic beverages, a Certificate of Insurance for liquor legal liability insurance in the amount of five hundred thousand dollars (\$500,000) bodily injury and property damage per each occurrence must be submitted with this application. Such insurance must contain a provision that the Commissioner of Accounts be notified if the policy is cancelled or if there has been a material change in coverage and/or conditions. The City of Saratoga Springs must be listed as the certificate holder with the physical address of 474 Broadway, Saratoga Springs, NY 12866.

The Certificate naming the City of Saratoga Springs as Additional Insured solely for the issuance of permit(s) should be addressed to the attention of:

Department of Accounts  
City of Saratoga Springs  
474 Broadway  
Saratoga Springs, NY 12866  
Attention: City Clerk's Office

The Licensee acknowledges that failure to obtain such insurance on behalf of the municipality constitutes a material breach of contract and subjects Licensee to liability for damages, indemnification and all other legal remedies available to the City. The Licensee is to provide the City with a Certificate of Insurance naming the City as Additional Insured prior to the issuance of any permit. The failure to object to the contents of the Certificate of Insurance or the absence of same shall not be deemed a waiver of any and all rights held by the municipality.

The Licensee shall indemnify and save harmless the City of Saratoga Springs, its Agents and Employees (hereinafter referred to as "City"), from and against all claims, damages, losses and expenses (including, but not limited to, attorneys' fees), arising out of or resulting from the licensed activity, sustained by any person or persons, provided that any such claim, damage, loss or expense is attributable to bodily injury, sickness, disease, or death, or to injury to or destruction of property caused by the tortuous act or negligent act or omission of Licensee or its employees, its agents or subcontractors.

Nothing in this license shall be construed as granting the Commissioner of Accounts any power to confer rights upon license holders to do or perform any act in contravention of any duly adopted zoning regulations or ordinance in effect in the City of Saratoga Springs. It shall be the responsibility of the licensee to determine if his or her activity complies with the applicable zoning ordinances.

***If this is an initial application*** for an eating and drinking, cabaret, or lodging license, you are required to submit with your application two (2) sets of detailed plans for your establishment. Plans must include a floor plan indicating the location of all rooms, hallways, doors, windows, reception areas, kitchen facilities, bathroom facilities, exits, bar or bars, fixed stations for security guards, and all fire protection equipment. The plans need to show the location of your structure relative to other parcels of land, adjacent streets, sidewalks, and public ways. If your establishment has on-site parking facilities, the plans must show them.

