

Board of Commissioners

229 Rehoboth Avenue  
P.O. Box 1163  
Rehoboth Beach, Delaware 19971



City of Rehoboth Beach

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[www.cityofrehoboth.com](http://www.cityofrehoboth.com)

APPLICATION FOR RESTAURANT PERMIT OF COMPLIANCE  
PURSUANT TO CHAPTER 215 OF THE MUNICIPAL CODE  
OF THE CITY OF REHOBOTH BEACH, DELAWARE

1. Name, Address and Telephone Number of Applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Status of Applicant (individual, partnership, corporation, other): \_\_\_\_\_  
\_\_\_\_\_
3. Name, style and designation under which the restaurant is to be conducted:  
\_\_\_\_\_  
\_\_\_\_\_
4. Business address and all telephone numbers where the restaurant is to be conducted:  
\_\_\_\_\_  
\_\_\_\_\_
5. Name and address of property owner if different from Applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Attached hereto are twelve (12) copies of the restaurant's existing floor plan with dimensions.
7. Attached hereto are twelve (12) scalable copies of a floor plan with dimensions of the proposed restaurant or proposed expansion of an existing restaurant which includes the following:
  - a. The location of the restaurant.
  - b. The location's zoning classification.
  - c. The number, sizes and location of bar areas in the restaurant.
  - d. The restaurant's seating capacity for bar, patio and dining areas.
  - e. The designated areas for storage, kitchen and staff areas, and bathroom facilities.
8. The restaurant hours of operation are: \_\_\_\_\_  
\_\_\_\_\_

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- 9. Attached hereto are twelve (12) copies of the menu.
- 10. It is certified that the primary purpose of the business shall be that of a restaurant as defined in Chapter 215 of the Municipal Code of the City of Rehoboth Beach, Delaware.
- 11. Approximate percentage of the projected annual revenue to be derived from the sale of alcoholic beverages is: \_\_\_\_\_.
- 12. Approximate percentage of the projected annual revenue to be derived from the sale of food is: \_\_\_\_\_.
- 13. The Applicant hereby authorizes the City of Rehoboth Beach, its agents and employees, to seek information and to conduct an investigation as to the truth of the statements set forth in this application.

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

STATE OF DELAWARE                    )  
   )  
 COUNTY OF SUSSEX                    )        SS.

BE IT REMEMBERED that on this \_\_\_\_\_ day of \_\_\_\_\_,  
 A.D. 20\_\_\_\_, personally appeared before me, the Subscriber, a Notary Public of the State  
 and County aforesaid, \_\_\_\_\_ in the foregoing application,  
 known to me personally to be such, and he did depose and say the foregoing application  
 is true and correct to the best of his knowledge and belief.

\_\_\_\_\_  
 SWORN TO AND SUBSCRIBED before me the day and year aforesaid.

\_\_\_\_\_  
 Notary Public

FEE: \$1,000.00