

City of St. Charles, Illinois

Ordinance No. 2010-M-36

An Ordinance Amending Title 5 "Business Licenses and Regulations," Chapter 5.08 "Alcoholic Beverages," Section 5.08.300 "Sale, Delivery, Consumption, and Possession of Alcoholic Liquor on Public Property" of the St. Charles Municipal Code

**Adopted by the
City Council
of the
City of St. Charles
May 17, 2010**

**Published in pamphlet form by
authority of the City Council
of the City of St. Charles,
Kane and Du Page Counties,
Illinois, May 21, 2010**

Nancy Garrison

City Clerk



(SEAL)

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City of St. Charles, IL
Ordinance No. 2010-M-36

An Ordinance Amending Title 5 "Business Licenses and Regulation," Chapter 5.08 "Alcoholic Beverages," Section 5.08.300, "Sale, Delivery, Consumption, and Possession of Alcoholic Liquor on Public Property" of the St. Charles Municipal Code

BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF ST. CHARLES, KANE AND DUPAGE COUNTIES, ILLINOIS, AS FOLLOWS:

SECTION ONE: That Title 5, "Business Licenses and Regulations", Chapter 5.08, "Alcoholic Beverages", Section 5.08.300, "Sale, delivery, consumption and possession of alcoholic liquor on public property" of the St. Charles Municipal Code, be and is hereby deleted in its entirety and in lieu thereof the following new Section 5.08.300 shall be substituted as follows:

"5.08.300 Sale, Delivery, Consumption and Possession of Alcoholic Liquor on Public Property.

It is unlawful for any person to sell, deliver, consume or possess, except in original packages with seals unbroken, any alcoholic liquor upon any streets, sidewalk, alley or other public right-of-way and City property. However, upon approval of the City Council and the consent of the Local Liquor Control Commissioner, this section shall not apply to the premises of a Class E license issued pursuant to this chapter.

Notwithstanding the foregoing, alcoholic liquor may be sold, delivered, consumed and possessed on the public right-of-way adjacent to the Class B-2 licensed premises located at 5 South First Street, subject to strict compliance with the site drawing (including conditions imposed by the Local Liquor Control Commissioner thereon) approved in conjunction with the issuance of the Class B-2 license for said premises.

Any person violating this section shall be fined seventy-five dollars (\$75.00) for the first offense and two hundred dollars (\$200.00) for each subsequent offense."

SECTION TWO: That after the adoption and approval hereof, this Ordinance shall (i) be printed or published in book or pamphlet form pursuant to the authority of the City Council, or (ii) within thirty (30) days after the adoption and approval hereof, be published in a newspaper published in and with a general circulation within the City of St. Charles.

SECTION THREE: This Ordinance shall be in full force and effect ten (10) days from and after its passage by a vote of the majority of the corporate authorities now holding office, approval and publication in the manner provided by law.

PRESENTED to the City Council of the City of St. Charles, Illinois, this 17th day of May, 2010.

PASSED by the City Council of the City of St. Charles, Illinois this 17th day of May, 2010.



APPROVED by the Mayor of the City of St. Charles, Illinois, this 17th day of May, 2010.

Donald P. DeWitte
Donald P. DeWitte, Mayor

ATTEST:

Nancy Garrison
Nancy Garrison
City Clerk

COUNCIL VOTE:

Ayes : 8
Nays : 2
Absent : _____

APPROVED AS TO FORM:

City Attorney

DATE: _____

RECEIVED

APR 15 2010

Building & Code Enforcement
St. Charles, IL

CITY OF ST. CHARLES

Annual Application

Sidewalk Cafe, Food Cart & Sidewalk Sign in Public Places



DIVISION: Building & Code Enforcement

PHONE: (630) 377-4406

FAX: (630) 443-4638

Application Date: _____ Parcel No. _____ Permit No. _____

PLEASE PRINT ALL INFORMATION

Property Address: S. South First St. St. Charles, IL. 60174

Name of Business at this location: La Za Za Trattoria

I hereby apply for permission to place the following on public property: (check all that apply)

- Sign
- Tables & Chairs
- Table Umbrellas
- Enclosure fencing
- Food cart(s)
- Other: _____

Note: Applicants are responsible for any permits required by the Illinois Department of Transportation (IDOT) for locations within the state right of way (Routes 64, 25, & 31).

Check List for Submittal of Application:

- Annual Permit Application – Completely Filled Out.
- Two-2 Copies of site plan with dimensions showing:
 - need* → Sidewalk/walkway/plaza width & length
 - Building wall & entrance
 - Light poles, benches & trash containers
 - Trees & tree grates
 - Bicycle racks & newspaper boxes
 - Proposed location of tables, chairs, food cart & sign
- Certificate of Worker's Compensation Insurance (as and if required by Illinois Statutes) – required when service is provided to customers in public places.
- Certificate of Comprehensive General Liability Insurance, with limits of at least \$2-million per occurrence and for any single injury, naming the City of St. Charles as co-insured or additional insured.
- Sidewalk Sign - \$30.00 annual fee (-7)
- Sidewalk Café/Food Cart - \$50.00 annual fee

Owner of the Property:

Applicant:

Name: Dino Sisto

Name: La Za Za Trattoria

Address: 988 Woodside Dr.

Address: 5 S. 1st Street

City/State/Zip Code: West Chicago, IL. 60185

City/State/Zip Code: St. Charles, IL. 60174

Telephone NO. 630-269-3100
cell

Telephone NO. 630-443-9304
rcsh

If approved, this permit allows for the use of the public sidewalk, walkway or plaza contiguous to the business at the above address for the uses indicated above, as shown on the approved site plan. **I understand and acknowledge** that this permit constitutes a revocable license for the use of public property. **I have read and agree to fully abide by** the requirements of this permit and of Section 12.04.102 and 12.04.104 of the St. Charles Municipal Code.

I further agree to indemnify and defend the City from and against any and all injuries, deaths, losses, damages, claims, suits, liabilities, judgments, costs and expenses, consequential or otherwise, including reasonable attorney's fees, which may in any way arise out of or be connected with the granting of this permit or which may in any way result therefrom, or from any act or failure to act by me, my agents or employees.

PRINT NAME: Dino Sisto SIGNATURE: Dino Sisto

AUTHORIZED SIGNATURE OF PROPERTY OWNER: owner is Dino Sisto
(if different from Applicant)

REPORT OF BUILDING OFFICIAL

Remarks: _____

Sidewalk Sign valid through December 31 _____ (year)

Sidewalk Café/Food Cart valid April 1 through October 31 of _____ (year)

Accepted: _____ Rejected: _____ Date: _____

Signed: _____

For Office Use
Received <u>4-15-2010</u>
Fee Paid \$ <u>50.</u>
Receipt # <u>376 2910</u>
Check # <u>7370</u>

ACORD. CERTIFICATE OF LIABILITY INSURANCE DATE(M/M/D/YYYY) **4/15/2010**

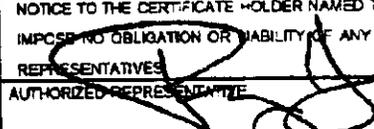
PRODUCER Hazen Insurance Agency & Assoc. 1100 W. Main St. St. Charles IL 60174 630.584.7888	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC#
INSURED PAS AVRE, INC DBA TRATTORIA ZA ZA ST. CHARLES/ADDISON/SYCAMORE 5 S FIRST ST ST. CHARLES, IL 60174	INSURER A: MID CENTURY	
	INSURER B: TRUCK INSURANCE EXCHANGE	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

GEN LTR	ADDP INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE(M/M/D/YYYY)	POLICY EXPIRATION DATE(M/M/D/YYYY)	LIMITS
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMSMADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	60201.90.84	02/17/10	02/17/11	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 75,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000
A		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	60201.90.84	02/17/10	02/17/11	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		EXCESS UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMSMADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
B		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	N0809.10.52	11/17/09	11/17/10	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A		OTHER Liquor Liability	60201.90.84	02/17/10	02/17/11	each occur: \$1,000,000 Aggregate: \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 LOCATION 1: 5 SOUTH FIRST ST, ST. CHARLES, IL 60174
 LOCATION 2: 2496 DEKALB AVE, SYCAMORE, IL 60178
 LOCATION 3: 1570 WEST LAKE ST UNIT 104, ADDISON, IL 60101

CERTIFICATE HOLDER CITY OF ST. CHARLES BUILDING & CODE ENFORCEMENT DIVISION TWO EAST MAIN STREET ST. CHARLES, IL 60174	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE: 
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ACORD CERTIFICATE OF LIABILITY INSURANCE DATE(MM/DD/YYYY) **3/2/2010**

PRODUCER
 Hazen Insurance Agency & Assoc.
 1100 W. Main St.
 St. Charles IL 60174
 630 584 7888

INSURED
 PAS AVRE, INC DBA TRATTORIA 2A 2A
 5 S FIRST ST
 ST. CHARLES, IL 60174

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

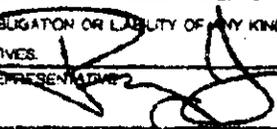
INSURERS AFFORDING COVERAGE	NAIC#
INSURER A: MID CENTURY	
INSURER B: TRUCK INSURANCE EXCHANGE	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CLASS LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMSMADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO <input type="checkbox"/> LOC	60201.90.84	02/17/10	02/17/11	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$ 75,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOE	60201.90.84	02/17/10	02/17/11	COMBINED SINGLE LIMIT (EA ACCIDENT) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY EA ACC \$ AGG \$
	EXCESSUMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMSMADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICEMEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	N0809.10.52	11/17/09	11/17/10	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	Liquor Liability	60201.90.84	02/17/10	02/17/11	each occur: \$1,000,000 Aggregate: \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / ENCL. ES; EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER ILLINOIS LIQUOR CONTROL COMMISSION 100 W. RANDOLPH ST, SUITE 3-300 CHICAGO, IL 60601	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 
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State of Illinois)
) ss.
Counties of Kane and DuPage)

Certificate

I, NANCY GARRISON, certify that I am the duly elected and acting Municipal City Clerk of the City of St. Charles, Kane and DuPage Counties, Illinois.

I further certify that on May 17, 2010, the Corporate Authorities of such municipality passed and approved Ordinance No. 2010-M-36, entitled

"An Ordinance Amending Title 5 "Business Licenses and Regulations," Chapter 5.08 "Alcoholic Beverages," Section 5.08.300 "Sale, Delivery, Consumption, and Possession of Alcoholic Liquor on Public Property" of the St. Charles Municipal Code
,"

which provided by its terms that it should be published in pamphlet form.

The pamphlet form of Ordinance No. 2010-M-36, including the Ordinance and a cover sheet thereof was prepared, and a copy of such Ordinance was posted in the municipal building, commencing on May 21, 2010, and continuing for at least ten days thereafter. Copies of such Ordinance were also available for public inspection upon request in the office of the municipal clerk.

DATED at St. Charles, Illinois, this 17th day of May 2010.



Nancy Garrison
Municipal Clerk

(S E A L)