



Dining Out NYC Insurance Requirements

Acknowledgement Form

[For restaurant to complete]

I,	Applicant Name] hereby acknowledge that, if
 Commercial general liability (CGL) insur (\$1,000,000) per occurrence. In the event aggregate shall apply on a per-location bat (\$2,000,000). This GCL policy must name employees as additional insured; Workers' Compensation insurance, Employeefits in compliance with the laws of the If alcohol is to be served within the sidewed insurance that names the City of New Yorkinsured in the amount of One Million Documents of the If automobiles are utilized, commercial and least One Million Dollars (\$1,000,000) earners. 	rance for no less than One Million Dollars is such insurance contains an aggregate limit, the asis and shall be at least Two Million Dollars are the City of New York and its officials and overs Liability insurance, and Disability he State of New York; walk or roadway cafe, liquor law liability rk and its officials and employees as additional
I also acknowledge and understand that more det requirements will be set forth in the revocable co. If approved, prior to or upon signing the revocab establishment shall provide to the New York City proof of insurance in a form acceptable to NYC.	onsent agreement for a sidewalk or roadway cafe ole consent agreement, the food service of Department of Transportation (NYC DOT)
Signature of License Applicant	Print Name
Date	Print Title / Position (if any)