



Growth Management Department
 201 SE 3rd Street, Second Floor
 Ocala, FL 34471, Phone: (352) 629-8404
 Email: gmd@ocalafl.org

License # _____
 Date Received _____

APPLICATION FOR SIDEWALK CAFÉ

Administrative Review Fee- \$100.00, which shall be credited toward the first-year permit fee should the application be approved. Sidewalk cafés shall only be permitted in the Form-based Code (FBC) zoning district.

NAME OF APPLICANT: BUCK MARTIN
 TITLE: OWNER ORGANIZATION: MARTIN & WEISS LLC
 ADDRESS OF APPLICANT: 3318 SE 3RD ST
 CITY: OCALA STATE: FL ZIP: 34471
 TEL #: (352) 817-9227 FAX #: _____ Email: BUCKMARTIN85@GMAIL.COM

BUSINESS NAME: THE TIPSY SKIPPER / MUTINY OCALA
 BUSINESS ADDRESS: 46 S. MAGNOLIA AVE. UNIT A+B
 CITY: OCALA STATE: FL ZIP: 34471
 TEL #: (352) 817-9227 FAX #: _____

BUSINESS LOCATION: 46 + 48 S. MAGNOLIA AVE.
 PARCEL NO: 2853-046-009 CITY ZONE: X
 DAYS/HOURS OF OPERATION: SUN-SAT 2-2

Will alcohol be consumed at the sidewalk café? Yes No (If Yes, please note that an application for an Alcoholic Beverage Location Permit to allow on premise consumption of alcohol outside of an enclosed building must also be submitted for consideration by the Ocala City Council.)

PROPERTY OWNER: NATIONAL GROWTH PARTNERS LLC
 ADDRESS: 11980 SE 22ND AVE RD
 CITY: OCALA STATE: FL ZIP: 34480
 TEL #: (352) 427-6907 FAX #: _____ Email: N/A

Application Materials required:

- Completed application form
- Application fee (Not needed until time of approval)
- A copy of a valid business license to operate a restaurant or a takeout food establishment adjacent to the sidewalk area which is the subject of the application
- A copy of a valid certificate of use for the building frontage adjacent to the sidewalk area which is the subject of the application
- A copy of current liability insurance. **Please note:** Prior to receiving the permit, the applicant shall provide to City proof of insurance and indemnification as required by Section 22-295, City of Ocala Code of Ordinances. For your convenience, the code section is copied below.
- A drawing, with a minimum scale of one-fourth inch equals one foot, showing the layout and dimensions of the existing sidewalk area and adjacent private property, proposed location, size and number of tables, chairs and umbrellas, location of doorways, location of trees, parking meters, sidewalk benches, trash receptacles, and any other sidewalk obstruction either existing or proposed within the pedestrian area
- Photographs, drawings or manufacturers' brochures fully describing the appearance of all proposed tables, chairs, umbrellas or other objects related to the sidewalk café
- Other information as requested by the City

- (12) The permittee shall notify the director in writing when operation of the sidewalk café begins. The notice shall be delivered to the director within 24 hours of such commencement.
- (13) Umbrellas provided for a sidewalk café must be anchored in a sufficient manner to remain stationary under windy conditions.
- (14) **Alcoholic beverages:** No alcoholic beverages may be consumed at the sidewalk café unless the Ocala City Council has approved a permit and a state license has been issued authorizing consumption within the designated sidewalk café area.

REQUIRED SIGNATURES/AFFIRMATIONS:

I, BUCK MARTIN, as OWNER of MARTIN & WEISS LLC being
Applicant's Name (PRINT) Title Name of Organization

first duly sworn, affirm and say that the information contained in this application is correct, that I have read the operation conditions listed above and agree to abide by the regulations of the City of Ocala.


 Applicant's Signature

Notarization For Applicant's Signature

STATE OF Florida COUNTY OF Marion

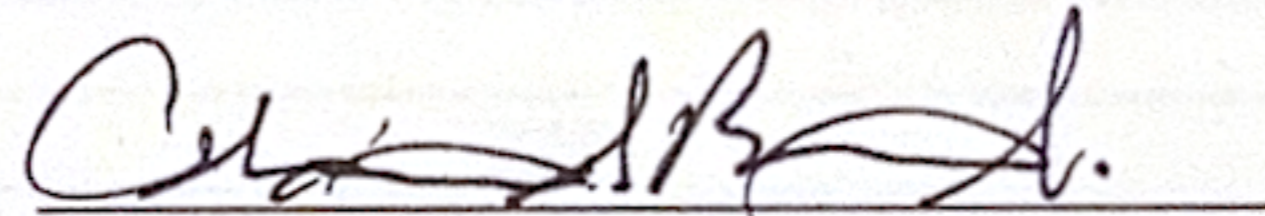
The foregoing instrument was acknowledged before me this 25 day of March, 2026, by

Buck Martin, as Owner of Martin & Weiss LLC
Applicant's Name (PRINT) Title Name of Organization

who is personally known to me or who has produced _____ as identification and who did / did not take an oath.



ALEXIS S. BETTY, JR.
 Notary Public
 State of Florida
 Comm# HH627032
 Expires 1/8/2029


 NOTARY PUBLIC

Commission No. HH627032
 Commission Expires: 1/08/2029

FOR OFFICE USE ONLY

Zoning Classification _____ Verified on _____ by _____

Approved by: _____ (Official) on _____ (Date)

TOTAL FEES DUE _____

DATE RECEIVED: _____ BUSINESS LICENSE # _____