

APPLICATION FOR SMOKING PERMIT

(Goshen City Ordinance No. 4417)

SECTION 1 Property Location/Contact Information

Name of building or enclosed facility seeking smoking permit:

Number of public entrances:

Address of building or enclosed facility seeking smoking permit:

Name of individual or entity operating building or enclosed facility seeking smoking permit:

Name of owner of the real estate (if different):

Mailing address of owner (if different):

Contact person (if different):

Telephone number:

SECTION 2 Exemption

Check the type of building or enclosed facility below for which you are seeking a smoking permit under an exemption and complete or supply requested information as applicable to the particular exemption:

- Hotel and motel rooms that are rented to guests and are designated as smoking rooms, except not more than twenty-five percent (25%) of rooms rented to guests in a hotel or motel may be so designated. The status of rooms as smoking or nonsmoking may not be changed, except to add additional nonsmoking rooms.

Designated non-smoking rooms: _____ Designated smoking rooms: _____ Total rooms: _____

- Retail tobacco store if smoke is not allowed to infiltrate into other areas of public accommodation or employment. (A retail tobacco store is defined to be a retail store utilized for the sale of tobacco or tobacco products and accessories and in which the sale of other products is merely incidental. It does not include a retail store which sells food or beverages.)

- Private and semi-private rooms in nursing homes and long-term care facilities that are occupied by one or more persons, all of whom are smokers and have requested in writing to be placed in a room where smoking is permitted provided that smoke from these places does not infiltrate into other areas of public accommodation or employment.

Copies of written request(s) are attached: Yes No

- Family-owned and operated and self-employed business in which all employees are related to the owner or the self-employed person, but only in the enclosed areas of the business and offices that are not open to the public.

- Private club. (A private club is defined to be a facility requiring a membership where entry into and the use of the facility is restricted to members and guests of members. If the general public is invited into the private club for an event, then smoking is prohibited in the portion of the facility in which the general public is invited for the event.)

- Any hall, room, or assembly area owned or operated by a church, synagogue, or other place of worship if smoking is a part of a religious ceremony or an essential part of the religious tenets.

- A bar meeting the following qualifications:

- The bar possesses a valid alcoholic beverage license from the State of Indiana;
- The bar allows no patron or employee under the age of eighteen (18) to enter at any time; and
- If any portion of the building containing the bar allows patrons or employees under the age of eighteen (18) to enter, the bar must also:
 - have an exhaust and air handling system separate from the remaining portions of the building;
 - have an exhaust and air handling system capable of collecting and removing smoke from the air and discharging the smoke to an approved location outside the building; and
 - have separation from the rest of the building by walls, windows, and doors that remain closed except to allow patrons and employees to enter and exit. There must be no open areas between the bar and the remainder of the building.

State of Indiana alcoholic beverage license number: _____

SECTION 3 Certification

I certify that the building or enclosed facility for which I am seeking a smoking permit meets the requirement(s) above for the exemption indicated. As a condition of receiving a smoking permit, I agree to post a conspicuous, clearly legible sign at all public entrances to the building or enclosed facility indicating that smoking is permitted in the area and/or tobacco smoke may be present. I understand that the permit is an annual permit effective through December 31st and I will have to reapply on an annual basis and pay an annual permit fee in order to continue to permit smoking in the building or enclosed facility.

Signature of individual or authorized representative of entity:

Date:

SECTION 4 **For Office Use Only**

The Goshen Building Department finds that the building or enclosed facility

- meets
- does not meet

all requirements under which the building or enclosed facility is requesting exemption, and

- grants
- denies

a smoking permit.

Comments:

Signature of inspector:

Date:

Smoking permit no:

Date issued: