| TEMPORARY USE APPLICATION                           |                     |                   |                      | Permit #              |
|---|---------------------|-------------------|----------------------|-----------------------|
| Property description (add                           | ress) for applicati | on                |                      |                       |
| General Information                                 | , 11                |                   |                      |                       |
| Applicant   |                     |                   | Day Phone            | #                     |
| Address   |                     |                   |                      |                       |
| Owner of record (                                   | attach affidavit if | not applicant     |                      |                       |
| Name  |                     |                   | Day Phone#           | <u> </u>              |
| Address   |                     |                   |                      |                       |
| Property information                                |                     |                   |                      |                       |
| Zoning District                                     | Current lan         | d use             | Tax Map Page#        | Lot#                  |
| Purpose of application: (I                          | Please include info | ormation about pr | oposed use, duration | n. parking, and other |
| relevant material.)                                 |                     |                   |                      |                       |
|   |                     |                   |                      |                       |
| Proposed time schedule:                             | from                | to                |                      |                       |
| Proposed time schedule: Plot plan attached (parkin  | g layout, location  | of use, etc. show | ing setbacks of use  | and signs)            |
| Size and number of signs                            |                     |                   |                      |                       |
| Size and number of signs<br>Describe any impacts on | public services (ir | cluding fire & Po | olice)               |                       |
|   |                     | C                 | ,                    |                       |
|   |                     |                   |                      |                       |
| upon approval of this app  Applicant                |                     |                   | Date                 |                       |
|   |                     |                   |                      |                       |
| Land Owner (if different)                           |                     | ]                 | Date                 |                       |
|   |                     | Staff Action      |                      |                       |
| Date received                                       |                     | Annroyad          | Denied               |                       |
| Date received                                       |                     | Approved          |                      |                       |
| Other approvals                                     |                     |                   |                      |                       |
|   |                     |                   |                      |                       |
| Conditions if any                                   |                     |                   |                      |                       |
|   |                     |                   |                      |                       |
| **Fee based on current                              | Foo Schodulo        |                   |                      |                       |
| r ce vascu on current                               | rec scheune         |                   | Fee Amount:          |                       |
|   |                     |                   | **                   | Fee Verified          |
|   |                     |                   |                      |                       |
|   |                     |                   |                      |                       |
| Stoff Cianotura                                     |                     |                   |                      |                       |
| Staff Signature                                     | Date                |                   |                      |                       |