

Planning



Department

TEMPORARY TENT PERMIT APPLICATION

A site plan is required to be submitted with this application. The site plan must show where the tent will be located on the property and must show all necessary distance measurements to property lines and other structures nearby. The applicant must also submit a floor plan showing the proposed interior setup of the tent which shall include all heating and electrical equipment. No lot may have a tent event more than two times per year and each tent event shall not last more than 30 days. Please note that tent events that involve the sale of fireworks have additional regulations and additional costs. If selling fireworks, please review all current ordinances regarding the sale of fireworks.

Parcel Number: _____

Address (If Applicable): _____

Subdivision Name (If Applicable): _____

Purpose of Tent: _____

Size of Tent: Length: _____ Width: _____ Height: _____

Anticipated Dates of Tent Event: _____

In the fields below, please provide the best point of contact for the applicant.

Name of Person: _____

Name of Company: _____

Business Address: _____

Phone Number: _____

Email: _____

In signing below, I (we) confirm that I (we) own the land identified on this application and that the information in this application is true to the best of my (our) knowledge. Additionally, I (we) consent to the proposal being represented with this application.

Landowner Signature: _____

Printed Name of Landowner: _____

Phone Number: _____

Email: _____

Additional Landowner Signature (If Applicable): _____

Printed Name of Landowner: _____

Phone Number: _____

Email: _____

Additional Landowner Signature (If Applicable): _____

Printed Name of Landowner: _____

Phone Number: _____

Email: _____

Temporary Tent Fee Schedule:

- If the event does not involve the sale of fireworks: $\$300 + (\$25 \text{ fire department fee}) = \325
- If the event involves the sale of fireworks: $\$1,000 + (\$25 \text{ fire department fee}) = \$1,025$

Temporary Tent Fee: _____

FOR OFFICE USE ONLY

Payment Type: ___ Cash ___ Check ___ Card

Amount Paid: _____

Date: _____

Permit Number: _____