



City Clerk's Office
 TEMPORARY USE PERMIT Application
 Subdivision Model Home

Applicant:		File #:	
<input type="checkbox"/> Complete application received Date:		<input type="checkbox"/> Permit issued <input type="checkbox"/> Permit denied Date:	
Applicant <input checked="" type="checkbox"/>	APPLICATION REQUIREMENTS:		Staff <input checked="" type="checkbox"/>
	Completed application		
	Application fee – \$65.00		
	Site plan, including:		
	<i>Date, project name</i>		
	<i>Existing structures, trees, landscaping, poles, walls, fences, berms, parking areas, vehicular drives, pathways, signs, etc.</i>		
	<i>Proposed model home, fencing, parking areas, drive aisles (include dimensions)</i>		
	<i>Proposed locations of garbage receptacles</i>		
	<i>Proposed locations of first aid stations, drinking water sources, and restrooms</i>		
	<i>Proposed locations of temporary signs</i>		
STAFF USE ONLY:			
City of Meridian Police Department approval			
City of Meridian Attorney's Office approval			
City of Meridian Planning Department approval			
City of Meridian Fire Department approval			
City of Meridian Building Services Department approval			

*THIS APPLICATION SHALL NOT BE CONSIDERED COMPLETE
 UNTIL STAFF HAS RECEIVED ALL REQUIRED INFORMATION.*



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APPLICANT INFORMATION

Applicant name: _____ Phone: _____

Applicant email address: _____

Applicant mailing address: _____

Applicant physical address: _____

Applicant tax identification number: _____

Agent upon whom service of process may be made in Idaho (*Person responsible for receiving legal documentation on behalf of Applicant*): _____

PROPERTY INFORMATION

Subdivision in which model home will be located: _____

Location of model home: _____

Assessor's parcel number(s): _____

Current land use: _____ Current zoning district: _____

Applicant's interest in property: Own Rent Other _____

Owner name: _____ Phone: _____

OPERATING INFORMATION

Date(s) of model home use: _____

Hours of operation: _____

General description of use of model home: _____

Persons who will operate under this permit (*List both mailing and physical addresses if not same; attach additional pages if necessary*): _____



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Parking area to be used (*dimensions, location, surface*): _____

Security personnel and equipment: _____

Crowd control measures: _____

Traffic control measures: _____

Emergency communication and evacuation plan: _____

Clean up and tear down plan (*include dates/times + sign removal*): _____

TEMPORARY SIGN INFORMATION

Temporary sign on-site: (*Not to exceed One (1) sign at Sixteen (16) square feet maximum*).

Size 1: _____ On-site