



City Clerk's Office
 TEMPORARY USE PERMIT Application
Promotional Sales/Event

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 Temporary Use Permit Application		
	Application fee – \$65.00		
	Site plan, including:		
	<i>Date, north arrow, project name, scale (not less than 1"=50")</i>		
	<i>Existing structures, trees, landscaping, poles, walls, fences, berms, parking areas, vehicular drives, pathways, signs, etc.</i>		
	<i>Proposed structures, fencing, parking areas, and drive aisles (include dimensions)</i>		
	<i>Proposed locations of goods and displays</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>		
	Type of electrical being used (generator, temp power pole, etc.)		
	Central District Health Dept. written approval (if necessary)		
	Idaho Liquor Catering Permit – If alcohol will be served or sold		
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 Department approval (if applicable)		
	Courtesy copy to Mayor		

*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: _____

Permanent proprietor hosting the use: _____

Permanent proprietor mailing address: _____

Permanent proprietor physical address: _____

Permanent proprietor tax identification number: _____

Agent upon whom service of process may be made in Idaho: _____

PROPERTY INFORMATION

Address/Location of promotional sales/event: _____

Assessor's parcel number(s): _____

Current land use: _____ Current zoning district: _____

Applicant's interest in property: Own Rent Other _____

Owner name: _____ Phone: _____

PROMOTIONAL SALES UNIT INFORMATION

Name of promotional sales/event: _____

Date(s) of promotional sales/event: _____

(Not to exceed 160 days per calendar year)

Hours of operation: _____

General description of sales/event: _____

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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Structures to be used (*dimensions, location, purpose*): _____

Type of electrical used for temporary structures: (*existing, temp power pole, generator, etc.*) _____

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 signs **on-site only**: (*Two (2) signs not to exceed 32 square feet each*)

Size 1: _____ Number of Size 1 signs: _____

Size 2: _____ Number of Size 2 signs: _____