



**City Clerk's Office**

TEMPORARY USE PERMIT Application  
Subdivision Real Estate Sales Office

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"/>	<b>APPLICATION REQUIREMENTS:</b>		Staff <input checked="" type="checkbox"/>
	Completed application		
	Application fee – \$65.00		
	<b>Site plan, including:</b>		
	<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 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>		
<b>STAFF USE ONLY:</b>			
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.*



**APPLICANT INFORMATION**

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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: \_\_\_\_\_

\_\_\_\_\_

**PROPERTY INFORMATION**

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Subdivision in which sales office will be located: \_\_\_\_\_

Location of sales office: \_\_\_\_\_

Assessor's parcel number(s): \_\_\_\_\_

Current land use: \_\_\_\_\_ Current zoning district: \_\_\_\_\_

Applicant's interest in property:  Own  Rent  Other \_\_\_\_\_

Owner name: \_\_\_\_\_ Phone: \_\_\_\_\_

**OPERATING INFORMATION**

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Date(s) of sales office use: \_\_\_\_\_

Hours of operation: \_\_\_\_\_

General description of use of sales office: \_\_\_\_\_

\_\_\_\_\_

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**

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Temporary signs on-site: (*One (1) allowed sign not to exceed Sixteen (16) square feet*)

Size 1: \_\_\_\_\_ Number of Size 1 signs: \_\_\_\_\_  On-site