

Temporary Event / Temporary Use Permit



Permit # _____

(Reference Allen Land Development Code Section 6.04 for additional requirements)

Site Information		
Property Address / Location:	Suite #	Business / Event Name
Special Event	Temporary Use / Building	
<input type="checkbox"/> Temporary Event (parking lot sales, sporting events, religious events, community garage sales) <input type="checkbox"/> Seasonal Sales (Firewood, Plants) *Farmer's Markets/Flea Markets Not Permitted <input type="checkbox"/> Christmas Tree Sales (Valid Nov. 15 - Jan. 1) <input type="checkbox"/> Carnival / Circus / Fairgrounds (5 day maximum) <input type="checkbox"/> Food Truck Site	<input type="checkbox"/> Construction Office <input type="checkbox"/> Real Estate Sales Office <input type="checkbox"/> Church / School Accessory Building <input type="checkbox"/> Concrete Batch Plant <input type="checkbox"/> Helistop _____ _____	
Description of Event		
Describe the proposed event, include all activities and list all food vendors: <input type="checkbox"/> Tent _____ sq. ft. (if over 200 sq. ft. fire retardant certificate required). <input type="checkbox"/> Canopy _____ sq. ft. (if over 400 sq. ft. fire retardant certificate required).		
Begin Date:	End Date:	
Submittal Requirements		
<input type="checkbox"/> Written letter of approval from the property owner and/or property owner must sign form <input type="checkbox"/> Site Plan showing the existing property, location of event, proposed activities and signage including location of tent(s) <input type="checkbox"/> Health Permit, if applicable, for food sales <input type="checkbox"/> Copy of sales tax permit, if applicable		
Applicant Information		
Name	Address	City, State, Zip
Phone	Email	Fax
If application is being made by a non-profit agency, name of agency:		
I have read the completed application and know the same is true and correct and hereby agree that if a permit is issued all provisions of the City Ordinances, Adopted Codes and State Laws will be complied with whether herein specified or not. I agree to comply with all property restrictions. I am the owner of the property or his duly authorized agent. Permission is hereby granted to enter the premises and make all inspections.		
APPLICANT NAME:		SIGNATURE:
CONTACT PHONE:		Applicant is: <input type="checkbox"/> Property Owner / Representative <input type="checkbox"/> Other
PROPERTY OWNER NAME:		SIGNATURE:
FEE PAID:	R'CVD BY:	DATE:
ISSUED BY:		DATE: