

APPLICATION - TEMPORARY USE PERMIT

Planning and Development Department
102 W. Main St.
Prattville, AL 36067
(334) 595-0502, FAX (334) 361-3677
planning@prattvilleal.gov



BUSINESS OPERATOR

Name: _____
Address: _____

Phone #: _____

DATES AND HOURS OF OPERATION

Dates: From _____ to _____
Hours: From _____ to _____
Explanation (if necessary) _____

TEMPORARY USE LOCATION

Address: _____

Shopping Center
Name: (if applicable): _____
Property Owner: _____

Owner Address: _____

Owner Phone Number: _____

TYPE OF TEMPORARY USE (check one)

- Carnival or Circus
 - Christmas Tree Sales
 - Contractor's Office or equipment storage
 - Real Estate sales office
 - Event of Public Interest
 - Religious tent meeting
 - Non-Profit Fund Raising
 - Sales of farm produce
- _____

NOTE: If temporary business is located on property owner by someone or an entity other than the applicant, then written permission to locate on the property must be attached to this application.

SKETCH PLAN

Attach a sketch plan of the proposed site containing the following items. Check the items included:

- North arrow and scale of no greater than 1"=100'
- All lot or boundary lines
- Location and dimensions of all structures and parking areas
- Location and dimensions of all streets, driveways or curb cuts surrounding the site
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- Location and dimensions of all signs to be used with the temporary activity
- Location of any water, sewer and electrical connections
- Location of nearest fire hydrant
- Certification by registered traffic engineer on a traffic management plan

CERTIFICATION

I certify that the information contained in this application is correct. I agree to comply with all local ordinances and state laws dealing with the proposed temporary use, and hereby authorize representatives of the City of Prattville to enter upon the above-mentioned property for inspection purposes

Applicant Signature

Date

For Departmental Use Only

Date Received:	Time Received:	Received By:	
City Planner Approval:	Date Approved:	Variance Required:	
Permit Issued By:	Date:	Picked-up by:	Date:

REVIEW

CITY PLANNER OR DESIGNEE

Zoning District: _____

Use permitted: _____

**TYPE OF TEMPORARY USE - VERIFIED
(Check one)**

- Carnival or Circus
- Christmas Tree Sales
- Contractor's Office or equipment storage
- Real Estate sales office
- Event of Public Interest
- Religious tent meeting
- Non-Profit Fund Raising
- Sales of farm produce

- Required Setback: _____
- Required Sign Setback: _____
- Required Sign Area: _____

Notes: _____

Conditions of Approval (all items listed below must be followed or permit is invalid):

Item #	Condition

Add pages as needed.