



# TEMPORARY USE PERMIT APPLICATION

CITY OF WAYNESBORO, BUILDING & ZONING DEPARTMENT

Reference City Code Chapter 98  
Sections 4.7 and 7.8

## A.) SITE INFORMATION:

**Application Fee: \$50.00**

Please attach a detailed site plan of entire property indicating all existing structures and uses, proposed location of all temporary structures, setbacks, travel lanes, parking spaces, storage areas, signs and any other relevant information as required to process this application. This application and permit are non-transferable. Only one temporary use permit per licensed business is allowed for more than 10 consecutive days in any six month time period. No temporary use shall be located within 300 feet of a residential use unless the temporary use is a City sanctioned/sponsored event.

Physical Address: \_\_\_\_\_ (Printed) Zoning District: \_\_\_\_\_

Property Owner of Record: \_\_\_\_\_ (Printed) Phone #: \_\_\_\_\_

Owner's Mailing Address (if different): \_\_\_\_\_ (Printed)

## B.) GENERAL INFORMATION:

Type of temporary use and general description: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Time period requested: Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

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

Will existing parking spaces be utilized?  Yes  No Will any extra lighting be required?  Yes  No

Are you serving food and/or drinks?  Yes  No Are you serving alcoholic beverages?  Yes  No

Will restroom facilities be provided?  Yes  No Will garbage facilities be provided?  Yes  No

Will any temporary signage be used?  \*Yes  No

Will any part of the temporary use be on public property?  \*\*Yes  No

Will there be live entertainment or amplified music or sound?  \*\*Yes  No

*\*Temporary signs require a sign permit and must comply with section 5.6 of the zoning ordinance.*

*\*\*Any amplified music/sound and/or temporarily closing of any sections of public property (i.e.: sidewalks, streets and/or alleys) will require permission from the City Manager prior to the event.*

## C.) APPLICANT INFORMATION:

Applicant Name: \_\_\_\_\_ (Printed)

Property Owner

\*Duly Authorized Tenant/Lessee

Mailing Address: \_\_\_\_\_ (Printed)

Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

*\* Power of Attorney Form and contract agreement with owner is required.*

**D.) SIGNATURE:**

**AFFIDAVIT:** The undersigned  property owner  \*duly authorized tenant/lessee  contractor [check one] certifies that the foregoing information is true and correct to the best of my knowledge and belief; with the understanding that any incorrect information submitted may result in the denial or revocation of this permit. I hereby authorize the City of Waynesboro to review this request and visit the site if necessary as a result of the review.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Phone Number \_\_\_\_\_

\* Power of Attorney Form and contract agreement with owner is required.

**FOR OFFICE USE ONLY:**

Date Rec'd \_\_\_\_\_

Permit # \_\_\_\_\_

Invoice #: \_\_\_\_\_

Fee \$ \_\_\_\_\_

Special Power of Attorney form received?  Yes  No  N/A

Contract agreement received?  Yes  No  N/A

Health Department verification received?  Yes  No  N/A

Alcoholic Beverage Control verification received?  Yes  No  N/A

Permission from City Manager received?  Yes  No  N/A

Not approved  Approved \_\_\_\_\_ Date: \_\_\_\_\_

Building & Zoning Department

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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