

APPLICATION FOR TEMPORARY USE PERMIT Baltimore, Ohio

Application No. _____

The undersigned applies for a Temporary Use Permit for the following use and the time period specified, said permit to be issued on the basis of the information contained within this application. The applicant certifies that all information and attachments to this application are true and correct. This application is required to be submitted at least seven (7) days prior to the propose start of the temporary use.

1. **Location Description:** Attach a graphic description of the property on which the temporary use is proposed to occur, to include a site plan depicting the yard(s), setback(s), parking facilities, and sanitary facilities, and the location of the temporary use proposed.

2.	Name of Owner:			
	Mailing Address			
	Phone Number (Home)	(Business)	(Cell)	
3.	Existing Use:			
4.	Property Presently Zoned As:			
5.	Description of Proposed Temporary Use:			
6.	Date(s) of Proposed Temporary Us			
7.	Name of Applicant/Organization: _			
	Mailing Address:			
	Phone Number(s):			
	Vendor's License Number:		<pre> (Attach photocopy.)</pre>	
Signature:		Dat	Date:	
	(For Off	icial Use Only)		
Date Received:		Fee Paid:		
Date	e of action on Application:	Approved:	Denied:	
lf Ap	oplication is denied, reason for denial	·		
-	-			

Date

Zoning Administrator