

OFFICE USE ONLY
DATE RECEIVED: _____
RECEIPT NO.: _____



**TEMPORARY USE
PERMIT APPLICATION**

Applicant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Property Owner Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Type of Temporary Use (check one):

- Produce Stand Food/Beverage Stand
 Garden Center Other _____

Proposed Activity Location: _____

Give a description, including dimensions of the temporary structure to be erected, constructed or placed upon the property. _____

Please state the need for such a temporary structure. _____

Describe the type of equipment/material to be used that might create noise, hazardous waste, or odors and provide any additional information that pertains to the temporary use.

Is a tent, canopy, or membrane structure being utilized? Yes No

If yes, a permit may be required from the Fire Department. Request a fire Department permit Application, which explains when a permit is needed and the requirements.

Is any portion of the parking lot involved in the use? Yes No

If yes, how many total parking spaces will be utilized? _____

Provide a site plan of a parking lot involved in the use to show the location of the proposed activity. Has this been provided? Yes No

Will the Temporary Use produce wastewater? Yes No

If yes, how will the wastewater be collected and disposed of?

Will a sign be utilized? Yes No

If yes, a [permit will be required from the Building Department.](#)

Please include the \$100.00 filing fee with this application.

APPLICANTS CERTIFICATION: - I hereby certify under penalty of perjury that the statements furnished including the drawing, present all information required for this applicant, and that the facts, statements, and information presented are true and correct, and based upon my personal knowledge. I hereby acknowledge my obligation to comply with the Johnston Municipal Code as it pertains to my business and to obtain any and all necessary City, County, State and Federal permits, approvals and/or clearances including but not limited to build and electrical permits, if applicable. Further, I hereby certify that I have read, understand and have received a copy of the conditions for the operation of the Temporary Use Permit and hereby agree to comply with such conditions. I also understand that should I fail to comply with the agreed upon conditions, my permit may be immediately revoked, I can be denied any future temporary use permits, and that all other applicable penalties, including prosecution may be pursued.

Name (Print): _____

Signature of Applicant: _____

Name (Print): _____

Signature of Property Owner (not required if separate letter/lease provided):
