

## TEMPORARY USE PERMIT Application Form

**Application Fee \$104** 

Project Name						
Project	Location					
Assessor's Parcel Number(s)						
Existing ZoningComprehensive Plan Land Use					Gross Acres	
Intent c	of this Request					
PROPERTY Owner	Name			Email		
	Address					
	City	State	ZIP	Phone (	)	
¥	Name			Email		
APPLICANT	Address					
	City	State	ZIP	Phone (	)	
CONTACT PERSON	Name			Email		
	City	State	ZIP	Phone (	_)	
OWNERSHIP DISCLOSURE	Please list all individuals and entities with an ownership interest in the Applicant and the Owners. Said list should					
	include, without limitation, homeowner's association, joint venture, trust, company or corporation or any and all general partners, corporate officers, and managers or limited liability companies with an interest in the Applicant and the Owner.					
	NAME		RELATIONSHIP		% OF OWNERSHIP	
OWN						
			1			
By signing	g this document I acknowledge		wledge the above list includes the n ship interests in either the applicant		s, general partners, managers of limited liability compa-	
		Thos, and an other owner.	sinp interests in entire the approach	tor owner only originar no	ary acceptod.	
Owner's Signature Print Name						
NOTARY					FOR OFFICE USE ONLY	
State o	of Cou	CTUP#				
The instrument was acknowledged before me by					Accepted By	
on					Date	
Notan	, Public					



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## **SUBMITTAL PROCESS**

Please email the completed application and required $\square$ All files need to be legible and submitted in a PDF format. All	•
$\square$ We can accept up to 25 MB per email.	
$\square$ If your files are larger than that, email us and we can send you	a link to the City's FTP site to upload the files for submittal.
CHECKLIST  The application cannot be accepted until the filing re	quirements below have been met.
☐ Original Signed & Notarized Application ☐ Copy of Deed ☐ Copy of Most Recent Assessor's Parcel Map Click Here ☐ Site Plan ☐ Property size, including dimensions of property ☐ Building size by square footage of use ☐ Vicinity map, north arrow, scale ☐ Setback(s) (if applicable) ☐ Number of parking spaces by use (provided and required)	□ Contact the City of Henderson Police Department at (702)267-5015 to determine if a special event or public assembly permit is required. Applications must be submitted 30 days prior to the actual event and can be downloaded to www.cityofhenderson.com/pohio/special_events.php.  Application decision is subject to appeal period referenced in Sec 19.19.6.D
☐ Street access to site, including width of proposed	Temporary and Special Events
driveways, street names, intersections, centerline, and ultimate right-of-way  Provide the following for abutting parcels: zoning,  Comprehensive Plan land use, and project name	Most temporary and special events require various City permits. Please contact the Community Development and Services Department with questions regarding Temporary Use Permits
☐ Building Elevations	<u>remits</u>
☐ Proposed exterior material and color	Additionally, depending on the size, scope, and location
□ Height of proposed buildings	of the event, permits may be required from other City
☐ Location and screening of all mechanical equipment	Departments as well. Please see the contact information below
☐ Justification Letter total length of time requested cannot exceed 30 days or as otherwise limited in Sec. 19.32.9	to obtain more details on which permits may be required.
stating:	Business Licensing at 702.267.1730
☐ That the proposed temporary use will be located, operated, and maintained in a manner consistent with the	or email COHbuslc@cityofhenderson.com
policies of the provisions of the Development Code	Building and Fire Safety at 702.267.3930
$\square$ That approval of the application will not be detrimental to	or email COHfiresafety@cityofhenderson.com
property or improvements in the surrounding area or the	
public health, safety, or general welfare	Henderson Police Department at 702.267.5015
☐ For any signage proposed with temporary use, show location, size, type, and number of signs (if applicable)	or email HPDpermitrequest@cityofhenderson.com
$\square$ Provide hours and days of operation for $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	Parks and Recreation at 702.267.5707 or email
applicable)	COHParksReservations@cityofhenderson.com (if you need to
	locate a City of Henderson Parks and Recreation Facility)

**Community Development and Services**