



TOWN OF WILKESON

TEMPORARY USE PERMIT APPLICATION

FOR TOWN USE ONLY	
Date received:	
Fee Paid:	
Receipt#:	
Received by:	

APPLICANT INFORMATION

Name _____

Address _____

Phone: _____ Fax: _____ Email: _____

If owner is different from applicant, what is the legal relationship of the applicant to the owner that entitles the applicant to make application?

Applicant's Signature _____ Date _____

Owner's name _____

Address _____

Phone: _____ Fax: _____ Email: _____

I (We) grant the above applicant permission to use my (our) property in the manner described in this application

Owner's Signature _____ Date _____

Owner's Signature _____ Date _____

Owner's Signature _____ Date _____

Representative's Name _____

Address _____

Phone: _____ Fax: _____ Email: _____

We, the above signatories attest under penalty of perjury that the information in this application is true and accurate. We also understand that it is our responsibility to understand and comply with all applicable federal, state and local regulations.

SPECIFIC TEMPORARY USE REQUEST (Attach additional photos and drawings as necessary) Please respond in detail to the following questions listed below. A temporary use will only be granted when the applicant demonstrates that the following conditions are met:

- 1 The temporary use will not impair the normal, safe and effective operation of a permanent use on the same site.

- 2 The temporary use will be compatible with used in general vicinity and on adjacent properties.

- 3 The temporary use will not impact public health safety or convenience, or create traffic hazards or congestion, or otherwise interrupt or interfere with normal conduct of uses and activities in the vicinity

- 4 The use and associated structures and living quarters will be conducted and used in a manner compatible with the surrounding area.

- 5 The temporary use shall comply with all applicable standards of the Pierce County Health Department
