

Building Services  
City-County Building Room 201  
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**APPLICATION FOR TEMPORARY USE PERMIT**

**IF APPROVED, THIS APPLICATION BECOMES THE PERMIT FOR THE SPECIFIED TEMPORARY USE**

Applicant's Name \_\_\_\_\_

Applicant's Address \_\_\_\_\_ Daytime Phone Number \_\_\_\_\_

Property Location (physical address) \_\_\_\_\_

Owner of Record of Property (business owner isn't necessarily property owner) \_\_\_\_\_

Legal Description \_\_\_\_\_ Site Plan Submitted YES \_\_\_ NO \_\_\_

Proposed Temporary Use \_\_\_\_\_

Dates of Operation (be specific) \_\_\_\_\_

Hours of Operation (be specific) \_\_\_\_\_

Will a tent be erected for this temporary use? \_\_\_\_\_ If Yes, indicate size of tent \_\_\_\_\_

How will the following be provided (if applicable):

Sanitation/Utilities \_\_\_\_\_ Parking/Traffic Control \_\_\_\_\_

Security \_\_\_\_\_ Fire Safety/Emergency Medical \_\_\_\_\_

Noise Control \_\_\_\_\_ Clean-Up/Restoration \_\_\_\_\_

PROPERTY OWNER'S SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

(or authorized representative of the property owner)

APPLICANT'S SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

(Staff Use Only-Below This Line)

Zoning of Property \_\_\_\_\_ Lot Area \_\_\_\_\_ License from City Clerk required? YES \_\_\_ NO \_\_\_

**Special Conditions:**

- All parking must be located on the site. No on street parking is allowed.
- All signs must be located on private property. No signs allowed within the right of way and cannot block the vision triangle at driveways or at driving aisles.
- Adequate site distances shall be maintained for all vehicles entering or leaving the site.
- No displays, merchandise or tables shall be located within the right of way.
- The site shall be cleaned up and restored to its original condition at the end of the temporary use.
- Other:

Date Approved \_\_\_\_\_ Approved By \_\_\_\_\_

**PERMIT TO BE ON SITE AND AVAILABLE DURING THE TEMPORARY USE PERIOD**

Fee \$ \_\_\_\_\_ Receipt # \_\_\_\_\_ Processed By \_\_\_\_\_