

Date Submitted & Fee Paid: \_\_\_\_\_

Permit Number: \_\_\_\_\_



## TEMPORARY USE PERMIT APPLICATION

24 N. Center St, Marshalltown, IA 50158. **Ph:** 641-754-5756 **Fax:** 641-754-5742

[www.ci.marshalltown.ia.us](http://www.ci.marshalltown.ia.us)

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**All Items listed must be submitted with this application:**

\_\_\_\_\_ A **site plan**, drawn in ink to scale. This site plan shall not be larger than 11"x17" and show parking.

\_\_\_\_\_ A **completed application for a building permit**.

\_\_\_\_\_ A **signed lease agreement** between the property owner and the applicant

\_\_\_\_\_ **Proof of insurance**.

\_\_\_\_\_ **Application fee**. A \$50 fee is required for a temporary use permit. Make check payable to "City of Marshalltown." The fee must be paid when the application is submitted.

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Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicant Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Owner's Address: \_\_\_\_\_

Address of Proposed Activity: \_\_\_\_\_

Dates of Proposed Activity: \_\_\_\_\_ **through** \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

Description of Proposed Activity (attach additional information if necessary)

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Is any portion of a parking lot involved? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, how many parking spaces will be taken up for the activity? \_\_\_\_\_

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

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**Agreement:** I understand the terms of the Temporary Use Permit chapter of the Zoning Ordinance of 1998. I agree to comply with the ordinance.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Date

**FOR CITY USE ONLY**

- Permission is hereby **granted** by the Public Works Director/City Engineer.  
 Other:

\_\_\_\_\_  
Public Works Director/City Engineer

\_\_\_\_\_  
Date

- Permission is hereby **granted** by the Zoning Officer.  
 Other:

\_\_\_\_\_  
Zoning Officer

\_\_\_\_\_  
Date