



Utah County
Community Development
 51 S. University Ave. Ste 117
 Provo, Ut 84601 - (801)851-8343

For Office Use Only	
Permit No.:	_____
Start date:	_____
Expiration date:	_____
Planning Fee:	_____
Fire Marshal Fee:	_____
Receipt No.:	_____

Temporary Use Permit Application

Check type of Temporary Use applying for and complete application:

- | | |
|---|--|
| <input type="checkbox"/> Agritourism – 65 days annually | <input type="checkbox"/> Migrant Camps - 45 days annually |
| <input type="checkbox"/> Auxiliary parking - 5 days, twice annually | <input type="checkbox"/> Recycling Equipment During Demolition - 6 months |
| <input type="checkbox"/> Christmas Tree Sales - 45 days annually | <input type="checkbox"/> Seasonal Sales and Services - 6 months |
| <input type="checkbox"/> Commercial Filming - 6 weeks (renewable) | <input type="checkbox"/> Small Event - 10 days, twice annually |
| <input type="checkbox"/> Seasonal or Holiday Event - 90 days annually | <input type="checkbox"/> Temp Existing Dwelling - 30 days (extension possible) |
| <input type="checkbox"/> Construction Yard - 1 year (renewable) | <input type="checkbox"/> Tents, Canopies & Membrane Structures - 180 days annually |

Applicant Name: _____ Phone: _____
 Mailing Address: _____ City: _____ State: _____ Zip: _____
 Email: _____ Name of Event/Business: _____
 Parcel No.: _____ Property Owner: _____ Describe
 event and list any equipment: _____

Applicant must submit a detailed site plan showing event, parking, structures, equipment, roads, accesses, closest residences, lighting, etc.

Source of power: _____ Type & number of sanitary facilities: _____
 Number of parking spaces: _____ Requested dates begin: _____ end: _____
 Hours of operation: _____ Lighting: _____

How will light be defused from surrounding _____

Applicant acknowledges that the temporary use, if granted, may not start prior to the indicated “Start Date” and becomes invalid upon the indicated “Expiration Date” for which the approval has been granted.

_____	_____	_____	_____
Property Owner’s Approval Signature	Date	Applicant’s Signature	Date

Applicant is required to receive the following approvals: (Staff will indicate if not applicable)

- Health Department (801-851-7525, 151 S. University Ave., #2600 Provo): _____
- Fire Marshal (801-851-8348, 51 S. University Ave, Provo): _____
- County Sheriff (801-851-4000, 3075 N Main, Spanish Fork): _____
- County Engineering (801-851-8600, 2855 S State, Provo): _____
- UDOT, access permit (801-227-8000, 825 N. 900 W. Orem): _____

Zone: _____ **Sec:** _____ **T:** _____ **R:** _____ **County Address:** _____

Planning Comments:

_____	_____
Zoning Administrator’s Approval	Date