



BUILDING & PLANNING DEPARTMENT

SPECIAL EVENT PERMIT APPLICATION

Application Date	_____	Permit Number	_____
Event Address	_____	Parcel ID	_____
Location	_____	Lot Number	_____
	_____	Zoning:	_____

TYPE OF EVENT

- Business
 Residential

EVENT DAY OR DATES

Starts on this day:	_____	Ends on this day:	_____
Starts at this time:	_____	Ends at this time:	_____

EVENT DESCRIPTION:

OWNER'S INFORMATION

NAME: _____
 ADDRESS: _____

 SUBDIVISION: _____
 HOME/CELL PHONE: _____
 EMAIL ADDRESS: _____

ACKNOWLEDGEMENT

I certify that all foregoing information is accurate and that the EVENT being initiated will be done in compliance with all applicable Land Development Regulations Chapter 7, Section 23, Letter E

_____	_____	Date: _____
Print Name of Owner	Approved Planning Department	
_____	_____	Date: _____
Signature of Owner	Approved by Fire Marshall	
_____	_____	Date: _____
Date Signed	Approved and Issued by Building Official	