



Application for a Temporary Use

Development Services
112 Goldsboro Street E., Wilson, NC 27893
PO Box 10, Wilson, NC 27894
252-399-2220
www.wilsonnc.org

Application #: _____ Date Submitted: _____

Applicant: _____

Address: _____

Phone: _____ Email: _____

What is your activity? _____

What are the dates of your activity? _____

What is the location of this activity? _____

Is there any setup or breakdown required? [] Yes [] No If yes, what is/are the date[s]? _____

Who is the owner of the site? _____

If the applicant is not the owner, please submit written approval for use of the site.

Who is the operator of the activity? _____

Will a tent be used? [] Yes [] No If yes, what size? _____ sq. ft.

If applicable, provide proof of flame retardation treatment, liability insurance and apply for a tent permit.

What mechanical and/or electrical equipment will be necessary to the conduct of your activity?:

Are any signs proposed for this temporary use? [] Yes [] No If yes, please describe type, size and location:

Provide staff with a sketch plan, drawn to scale, showing the approximate layout of:

- 1. The location or placement of any buildings or structures.
2. The area to be used by both operator's and customer's vehicles; indicate the total number of parking spaces.
3. Designation of entrances, exits, and traffic flow.
4. Estimated number of customers or participants
5. Waste containment devices for removal of debris and other trash.
6. Location of portable toilet and hand washing facilities.
7. Location of any portable mechanical or electrical equipment.

I will comply with all requirements of Section 3.12 of the Unified Development Ordinance of the City of Wilson and any conditions affixed to the Temporary Use Permit.

Signature

Date