

City of Green Zoning Division

1755 Town Park Blvd * P.O. Box 278 * Green, OH 44232-0278

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330-896-6605

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330-899-0469

Email:

zoning@cityofgreen.org

TEMPORARY USE PERMIT APPLICATION

Date:

TEMPORARY EVENT OR SALE

Temporary Uses are permitted in all zoning districts. A Temporary Use Permit must be obtained through the Zoning Division Office a minimum of 7 days prior to the event; the permit fee is \$50, payable to City of Green.

Temporary Use Permits are required for temporary events & sales, including but not limited to:

- Festivals & fairs
- Shows
- Showcases
- Concerts
- Dances
- Sales
- Rallies
- Parades
- Demonstrations or competitions of creative athletic form
- House or Garden Tours
- Any assemblage of individuals for the purpose of observing engaging in legal activities

Application: Submit two copies of the completed application form, a site plan*, and copy of vendors' license & food service license, as applicable. * *Site plan is required if the activity is planned for a stationary location, and must include:*

- 1) Dimensions, type, & location of all structures on the site in relationship to streets & property boundaries;
- 2) Setbacks of all structures from property lines and distance between multiple structures;
- 3) Ingress/egress access(es) to the site, traffic circulation & parking;
- 4) Location of sanitary facilities, as applicable.
- 5) Indicate within / near which structures cooking operations will be performed, and method.
- 6) Indicate location(s) and securable method for all propane cylinders to be used onsite.
- 7) Indicate locations of fire hydrants, showing that they will not be blocked and have 10 ft clearance on all sides.
- 8) Indicate location & method of waste collection & disposal.

Note: Separate permit is required for signage

Property Address/Location:

Name of Event / Business:	Begin: _____	End: _____
Applicant:	Applicant Tel: _____	
Applicant Mailing: _____		
Property Owner:	Owner Tel: _____	
Property Owner Mailing: _____		
Description of Activity / Purpose: _____		

Tents/trailers? List sizes & use; note locations on site plan: ___ x ___ ___ x ___

Electric Used? Yes No If yes, explain source of electric: _____

Food Served? Yes No If yes, is food prepackaged? _____

Is cooking proposed? Yes No If yes, source: Charcoal Propane / grill Electric

Food/beverages proposed: _____

Vendor's License No: (attach copy) _____

Summit County Health Dept. Food Service License issue date/number: (attach copy) _____

EVENTS & TENTS: Summit County Dept. of Building Standards, 1030 E. Tallmadge Ave. 330-630-7280

SAFETY INSPECTION: Contact Green Fire for a safety instructions for your event: Inspection Bureau 330-896-6609 Kevin or Scotty

FOOD SERVICE: Contact the Summit County Health Department for information about food service permits and inspections: 330-923-4891

THE UNDERSIGNED HEREBY CERTIFIES THAT THE INFORMATION IN AND WITH THIS APPLICATION IS TRUE AND ACCURATE, AND CONSENTS TO AGENTS OF THE CITY ENTERING PREMISES FOR INSPECTION AND VERIFICATION OF INFORMATION SUBMITTED, AND IF THIS APPLICATION IS APPROVED, TO VERIFY CONFORMANCE TO REQUIREMENTS AND CONDITIONS OF SUCH APPROVAL.

Applicant signature:

Property Owner Approval:

Printed:

Printed: