



### TEMPORARY BUILDING APPLICATION

#### APPLICANT INFORMATION (Please Print)

Applicant's Name: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_

Company Name: \_\_\_\_\_ Fax Number: (\_\_\_\_) \_\_\_\_\_

Business Address : \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If the applicant is other than the general contractor or owner, please provide their information:

Owner's or General Contractor's Name: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_

#### TEMPORARY BUILDING INFORMATION

Address of Placement: \_\_\_\_\_ Project No.: \_\_\_\_\_

Reason a temporary building is necessary: \_\_\_\_\_

Occupancy Type (Type of Business): \_\_\_\_\_

Description of how the utilities will be established.

Water: \_\_\_\_\_

Sanitary: \_\_\_\_\_

Electrical: \_\_\_\_\_

Other Information/Remarks: \_\_\_\_\_

#### APPLICANT STATEMENT

I understand that (*initial below*):

\_\_\_\_\_ Two sets of plans shall be submitted to the Commercial Plan Review Section for review. The temporary building may not be placed at the site until the plans are approved AND not occupied until all inspections have been finalized.

\_\_\_\_\_ The temporary building shall be removed no later than 180 days after the plans have been approved. CITATIONS MAY BE ISSUED IF THE BUILDING IS NOT REMOVED WITHIN THIS TIME.

**I certify with my signature that I have read and understand the statements listed above.**

\_\_\_\_\_ Signature

\_\_\_\_\_ Date

#### STANDARD REQUEST FEE

A standard request fee of **\$72.68** (\$44.73 plus a \$27.95 administrative fee) must be paid at the time the application is submitted.