CITY OF MADRAS COMMUNITY DEVELOPMENT DEPARTMENT

TEMPORARY USE APPLICATION

(To be accompanied by a Plot Plan Map, and Letter of Authorization, if applicable.)

OFFIC	CE USE ONLY
FILE #	FEE \$
RECEIPT #	_ RECEIVED By
ZONING DA	ATE RECEIVED

	,	T.P.	ZONING	DATE RECEIVED	
To	cription of the wnship	Subject Property: Range	Section	Tax Lot	
Street add	lress of the pro	perty:			
of my kno	wledge and beli nd Planning Co	ef, they are true and c	correct. I authorize th	ad all attached exhibits, and to the best the City of Madras staff, Hearing's on of the site in conjunction with this	
APPLICA	NT:				
Co	mpany Name_	eBusiness License #			
Pri	nted Name:				
Sig	gnature:			Date:	
Ad	dress:			Phone:	
Cit	y/State/Zip:			Fax:	
PROPERT	ΓΥ OWNER (if	different from Appli	cant)		
Pri	nted Name:				
Sig	gnature:			Date:	
Ad	dress:			Phone:	
Cit	y/State/Zip:			Fax:	

1.	Existing use of the proposed site:				
2.	Length of time the	: O are proposed to remain on site:			
	b. use is prope	osed for the site:			
3.	Type of building(s) to be used for the temporary structure or use:				
4.	Detailed description of the proposed use including the type(s) of sales and products				
5.		rees will be on site?			
6.	What are the hours of operation?				
7.	What days of the week will the temporary use be in operation				

	period not to excee each and every ris	owledges that the Seasonal Temporary Use/Structure is valid for a ed three (3) months (i.e. 90 consecutive days); and the applicant accepts k of loss and damage that may result if the application is denied, and cold the city, and its officers, agents, and employees harmless from said			
	The applicant agre use permit is deni	es to restore the site to its original condition if the application for the land ed.			
Return Application To:		City of Madras Community Development Department 125 SW 'E' Street Madras, Oregon 97741			
		Phone: 541-475-3388 Fax: 541-475-7061			