

PLANNING AND DEVELOPMENT DEPARTMENT TEMPORARY USE APPLICATION

Tel: 727-562-4547

Revised: MAR 2025

THE APPLICANT AND/OR AGENT IS REQUIRED TO SUBMIT COMPLETE AND CORRECT INFORMATION AS INCLUDED IN THIS APPLICATION. THIS APPLICATION IS REQUIRED TO BE SUBMITTED ONLINE THROUGH THE **ZONING PORTAL** ON **THE ZONING WEBPAGE**.

THE APPLICANT, BY FILING THIS APPLICATION, AGREES TO COMPLY WITH ALL APPLICABLE REQUIREMENTS OF THE COMMUNITY DEVELOPMENT CODE, SPECIFICALLY THAT THEY WILL OBTAIN THE APPROPRIATE BUSINESS TAX RECEIPT(S) REQUIRED FOR THE PROPOSED TEMPORARY USE, AND TO COMPLY WITH THE REQUIREMENTS CONTAINED IN SECTION 3-2103, COMMUNITY DEVELOPMENT CODE. IF THE PROPERTY OWNER IS NOT A NATURAL PERSON, SUCH AS AN ORGANIZATION (COMPANY OR TRUST), THE NAME OF THE PERSON SIGNING ON BEHALF IS REQUIRED. IF THERE IS MORE THAN ONE AGENT OR REPRESENTATIVE, THE NAME OF EACH PERSON NEEDS TO BE PROVIDED.

TEMPORARY USES MAY BE PERMITTED ON APPROPRIATELY ZONED PROPERTIES SUBJECT TO MEETING THOSE STANDARDS SET FORTH IN SECTION 3-2102, COMMUNITY DEVELOPMENT CODE.

TEMPORARY USE PERMIT FOR SEASONAL SALES:		\$250		
ALL OTHER TEMPORARY USE PERMITS:		NO FEE		
PROPERTY OWNER (PER DEED):				
MAILING ADDRESS:				
FAAAII.				
BUSINESS				
OWNER/REPRESENTATIVE:				
MAILING ADDRESS:				
DUONE NUMBER.				
FRAAU.				
ADDRESS OF SUBJECT PROPERTY:				
DESCRIPTION OF TEMPORARY			-	
USE:				
START DATE:		FINISH DATE:		
IS SIGNAGE PROPOSED? (MAXIMUM OF ONE	FREESTANDI	NG OR ONE ATTACHED SIGN PER		
RIGHT-OF-WAY. MAXIMUM 12 SQ. FT. SIGN PER			YES	NO _
ARE ANY TEMPORARY BUILDINGS OR TENTS PRO	POSED?		YES 🗌	№ □



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BY SIGNING BELOW, YOU AGREE TO THE FOLLOWING: THAT THE SITE PLAN PROVIDED DEPICTS THE LOCATION OF THE PROPOSED TEMPORARY USE, ALL PARKING SPACES AND DRIVE AISLES, RESTROOM FACILITIES, TRASH DISPOSAL FACILITIES, AND SIGNAGE. FURTHER, ALL TEMPORARY USES SHALL COMPLY WITH THE BELOW STANDARDS.

	The temporary use will not create hazardou	s vehicular or pedestrian traffic conditions.						
	The design and installation of all practic congestion.	cable temporary traffic control devices including signage to minimize traffic						
	· · · · · · · · · · · · · · · · · · ·	Adequate sanitary facilities, utility, drainage, refuse management, emergency services and access, and similar necessary facilities and services will be available to serve employees, patrons or participants.						
☐ Where a tent or similar structure is to be used, such structure shall:								
	☐ Comply with the requirements of the fi	re marshal;						
	☐ Provide the city with a certificate of ins	urance to cover the liability of the applicant or sponsor; and						
		sistant by providing a certificate of flame resistance or other assurance that the the flame retarder and has been maintained as such.						
		not exceed 12 square feet of sign face area and no more than one sign face per hall be made of treated wood or other durable material. Sign copy shall not be						
THE	HE FOLLOWING TYPES OF SIGNS ARE <u>PROHIBI</u>	TED; PURSUANT TO SEC. 3-1804:						
	Balloons, cold air inflatables, streamers or p	ennants.						
	Sandwich board signs.							
	Signs attached to any tree or vegetation.	Signs attached to any tree or vegetation.						
	3 Signs displayed by a person either on a pub	Signs displayed by a person either on a public right-of-way or visible from a public right-of-way.						
	Signs that emit sound, vapor, smoke, odor, particles, or gaseous matter.							
	3 Signs that move, revolve, twirl, rotate or fla	Signs that move, revolve, twirl, rotate or flash, including animated signs, multi-prism sign, floodlights and beacon lights.						
	Three dimensional objects that are used as	signs.						
	Vehicle signs, portable signs or portable tra	iler signs.						
	STATE OF FLORIDA COUNTY OF PINELLAS							
		ed before me by means * physical presence or * online notarization, this						
	license as identification.							
	NOTARY PUBLIC							
	Signature:	_						
	My Commission expires:	<u>-</u>						



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FOR OFFICIAL USE ONLY

APPLICATION NUMBER:				
NUMBER OF EVENTS AVAILABLE: NUMBER OF EVENTS PRPOSED: CREDIT EVENTS REMAINING:		NUMBER (OF DAYS AVAILABLE: OF DAYS PROPOSED:	
CODE COMPLIANCE REVIEW REQUIRED? APPROVED BY:			DATE:	
FIRE REVIEW REQUIRED? APPROVED BY:	_		DATE:	
POLICE REVIEW REQUIRED? APPROVED BY:			DATE:	
TRAFFIC ENGINEERING REVIEW REQUIRED? APPROVED BY:			DATE:	
ZONING REVIEW REQUIRED? APPROVED BY:	YES	NO 🗌	DATE:	



PLANNING AND DEVELOPMENT DEPARTMENT AFFIDAVIT TO AUTHORIZE AGENT/REPRESENTATIVE

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1.	Provide names of all property owners on deed – PRINT full names:						
2.	That (I am/we are) the owner(s) and record title holder(s) of the following described property:						
3.	That this property constitutes the property for which a request for (describe request):						
4.	That the undersigned (has/have) appointed and (does/do) appoint:						
	as (his/their) agent(s) to execute any petitions or other documents necessary to affect such petition;						
5.	That this affidavit has been executed to induce the City of Clearwater, Florida to consider and act on the above described property;						
6.	That site visits to the property are necessary by City representatives in order to process this application and the owner authorizes City representatives to visit and photograph the property described in this application;						
7.	That (I/we), the undersigned authority, hereby certify that the foregoing is true and correct.						
	Property Owner/ Registered Agent of Organization Property Owner/ Registered Agent of Organization						
	Property Owner/ Registered Agent of Organization Property Owner/ Registered Agent of Organization						
	STATE OF FLORIDA COUNTY OF PINELLAS						
	The foregoing instrument was acknowledged before me by means * physical presence or * online notarization, this day of, 202 by () as () of (), who is/are personally known to me or who has/have produced a driver's license as identification.						
	NOTARY PUBLIC						
	Signature:						
	My Commission expires:						