



Phone: (903) 677-6615
 Fax: (903) 220-0935
 Email: planning@athenstx.gov

Development Services
 501 U.S. Highway 175 West
 Athens, TX 75751

TEMPORARY USE PERMIT APPLICATION

LOCATION AND APPLICANT INFORMATION

Property Address: _____
 Business/Org: _____
 Applicant Name: _____ Applicant Phone: _____
 Applicant Email: _____
 On-Site Contact: _____ Contact Phone: _____
 Contact Email: _____

TEMPORARY USE INFORMATION

Name of Event _____
 Date(s): _____ Hours: _____
 Brief Description: _____

ADDITIONAL ACTIVITIES

Will the temporary use involve any of the following?

| | | | |
|---|--|---|--|
| <input type="checkbox"/> Alcohol Sales | <input type="checkbox"/> Alcohol Consumption | <input type="checkbox"/> Aerial Drones | <input type="checkbox"/> Amplified Sound |
| <input type="checkbox"/> Amusement Rides | <input type="checkbox"/> Animals | <input type="checkbox"/> Bagged Parking Signs | <input type="checkbox"/> Bleachers |
| <input type="checkbox"/> City Park Property | <input type="checkbox"/> EMS Personnel | <input type="checkbox"/> Fencing | <input type="checkbox"/> Fireworks |
| <input type="checkbox"/> Food/Beverage Sales | <input type="checkbox"/> Police (Security/Traffic) | <input type="checkbox"/> Portable Restrooms | <input type="checkbox"/> Signs/Banners |
| <input type="checkbox"/> Stages | <input type="checkbox"/> Street Closures | <input type="checkbox"/> Temporary Structures | <input type="checkbox"/> Tents |
| <input type="checkbox"/> Traffic Cones/Barriers | <input type="checkbox"/> Other: _____ | | |

| | |
|--|---|
| Number of Participants/Attendees <input type="checkbox"/> 0-50 <input type="checkbox"/> 250-500 <input type="checkbox"/> 1000+ <input type="checkbox"/> 50-250 <input type="checkbox"/> 500-1000 <input type="checkbox"/> Unsure | Is event attendance limited or open? <input type="checkbox"/> Limited (set attendance such as a ticketed event) <input type="checkbox"/> Open (anyone may attend at any time) |
|--|---|

I agree to abide by all laws and ordinances governing the City of Athens, TX. I further understand that any temporary use found incompatible with the purpose of Ordinance O-10-16, found to impair the normal, safe, and effective operation of a permanent use on the same site, found to be injurious to properties in the immediate vicinity, and/or found to endanger or be materially detrimental to the public health, safety and welfare may result in denial of this application.

I acknowledge that all of the information provided in the application is true and correct to the best of my knowledge. Furthermore, I am the legal owner of the property described in the application or, alternatively, that I am authorized to represent all of the owners of the property where the sign(s) will be removed, repaired, constructed, or altered.

Signature: _____ **Date:** _____

FOR OFFICE USE ONLY

| | | | | |
|---------------------------|--|--------------------|----------------------|-----------------|
| Approved? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Approved By: _____ | Date Approved: _____ | Permit #: _____ |
| Reason for Decline: _____ | | | | |



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APPLICATION SUBMITTAL REQUIREMENTS

1. Completed Application Form
2. A Site Plan Showing:
 - a. Designated Parking Areas
 - b. Traffic Management Plan and Traffic Safety Device Locations
 - c. Restroom Facilities
 - d. Trash/Recycling Facilities
 - e. Food and/or Alcohol Service Stations
 - f. Signage
 - g. Staging Areas
3. For Evening/Night Events
 - a. Provide a description of steps taken to reduce the noise and lighting impact on adjacent properties.
4. Other information as requested by City Staff

TEMPORARY SIGN SITE PLAN DRAWING AND DIMENSIONS