FOR OFFICE USE ONLY

DATE RECEIVED

EST 1808
CITY OF
DELAWARE
OHIO

Temporary Use Permit Application

**FOR OFFICE USE ONLY*

PERMIT NUMBER

☐ Model Home/Apartment ☐ Sales Office ☐ Construction Trailer ☐ Other (specify): _____

Subdivision _____ Phase _____ Section _____

Address _____

Parcel Number _____

Zoning District _____ Lot _____

Contact Email _____ Contact Phone _____

Property Owner (if different than Applicant) _____ Owner Phone _____

Owner Address _____ Owner Email _____

Email _____

*if the Applicant is not the owner of the property, the Property Owner is required to sign the application to authorize proposed changes.

Description of work / temporary use **(including proposed hours of operation and dates, if applicable)**

_____

_____

_____

_____

_____

The undersigned is either the property owner or a duly authorized agent of the property owner and do hereby verify the truth and correctness of all facts and information presented with this application and authorize on-site inspections by City Staff.

Owner or Authorized Agent _____ **Date** _____

Approved By _____ Date _____

Planning/Zoning _____ Date _____

CBO _____ Date _____

Model Home / Apartment	$165
Temporary Sales Office	$165
Construction Trailer	$165
All Other Types	$35

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