



TEMPORARY USE APPLICATION

(private property only)

City of Cedarburg
W63N645 Washington Ave
PO Box 49
Cedarburg WI 53012
(262) 375-7600
www.ci.cedarburg.wi.us

Applicant Name: _____ Phone: _____

Mailing Address: _____ Email: _____

Location Address: _____

Property Owner: _____ Phone: _____

Property Owner Mailing Address: _____ Email: _____

Proposed Use: _____

Dates of Operation: _____ Hours of Operation: _____

The following information needs to be submitted along with this completed application:

- 1) **Payment of \$27.50 fee via cash, charge or check.**
- 2) **Drawing showing location in relation to lot lines and other structures on site.**
(if more space is needed use other side of page)

The undersigned certifies that he/she has familiarized himself/herself with the State and Local Codes and procedures pertaining to this application. The undersigned further hereby certifies that the information contained in this application is true and correct.

Property Owner Signature _____ Date _____

Conditions of Approval:

- 1) The applicant shall be responsible to correct any problem that may result from this use immediately upon notification.
- 2) All items shall be a minimum of two feet from the sidewalk.
- 3) No unattended merchandise stands, displays or materials are allowed.
- 4) Use of public street waste containers is not permitted.

APPLICATION APPROVED BY:

City Planner _____ Date _____ Building Inspector _____ Date _____

Fire Inspector _____ Date _____

FOR CITY STAFF USE ONLY

TOTAL FEE: \$ 27.50 DATE FEE PAID: _____ APPLICATION AND FEE RECEIVED BY: _____

IF USE IS IN THE HISTORIC DISTRICT, LANDMARKS COMMISSION MEETING DATE AND TIME: _____

IF USE EXCEEDS FOURTEEN DAYS, PLAN COMMISSION MEETING DATE AND TIME: _____

cc: Applicant Festival Committee
Deputy City Clerk Cedarburg Police Department
Temporary Permit File Property File Tax Key No: _____