TEMPLE TERRACE COMMUNITY DEVELOPMENT DEPARTMENT BUILDING DIVISION



P		A
PROPERTY OWNER INFORMATION		APPLICANT INFORMATION ADDITIONAL NAME:
NAME:		APPLICANT NAME:
MAILING ADDRESS:		REPRESENTING COMPANY/ORGANIZATION/GROUP NAME:
		APPLICANT TITLE/REPRESENTATIVE CAPACITY:
TELEPHONE #:		TELEPHONE #:
LOCATION OF PROPOSED ACTIVITY	/:	
DETAILED DESCRIPTION OF ACTIVITY:		
Are signs, handbills, equipment, louds	PEAKERS, POSTERS OR MATERIALS (OF ANY KIND TO BE USED? IF SO, PLEASE DESCRIBE/EXPLAIN:
DATES & TIMES OF PROPOSED ACTIVITY:	DATE: FROM	ТО
	TIME: FROM	TO
WITHIN THE RIGHT-OF-WAY.	ED WITHIN THE "SITE TRIANGLE". D IN THE RIGHT-OF-WAY. RIGHT-OF-WAY CING ETC. SHALL NOT IMPEDE THE	
		APPLICANT INITIALS:
BUILDING PERMIT APPLICATION COMPLIANCE WITH FLORIE	ATION IS TRUE AND C OA BUILDING CODE SIX RUCTION, ZONING AND	AT ALL THE INFORMATION CONTAINED IN THIS ORRECT AND THAT ALL WORK WILL BE DONE IN KTH EDITION (2017) AND ALL OTHER APPLICABLE DLAND DEVELOPMENT WHETHER OR NOT SHOWN THIS PERMIT.
APPLICANT SIGNATURE		DATE
Drossom #.		USE ONLY
PERMIT #:	ZONING:	APPLICATION DATE:
BUILDING		DATE
		DATEDATE