Department of Economic Growth

Special Event Use Approval
Part II of II

Date: _____

Owner(s) of the property: _____

Address: _____

Phone No.: _____ Email Address: _____

Agent's Name: _____

Address: _____

Phone No.: _____ Email Address: _____

Operator's Name: _____

Address: _____

Phone No.: _____ Email Address: _____

Site address / Alternate Key of the special event: _____
(Provide a copy of the property record card for the site of the special event)

What is the purpose of the special event, please be specific: _____

_____

Name of the Event: _____

Date(s) of the event: _____ Number of people attending event: _____

_____
Owner, Agent or Operator's Signature

TO BE COMPLETED BY COUNTY STAFF: Fee Code: SEP - $100

Special Event #_____ Address #_____ Alternate Key #_____

Zoning: _____ Future Land Use Category: _____

Does the proposed use comply with LDRs: _____Yes _____No

Does the proposed use comply with the Comprehensive Plan: _____Yes _____No

Use of site approved: _____Yes _____No

Staff Notes: _____

Jurisdiction: _____

_____ _____
Name and title of Economic Growth Staff Signature of Staff Date