TEMPORARY USE PERMIT

CITY OF ALHAMBRA
DEVELOPMENT SERVICES DEPARTMENT
(626) 570-5034

1. Event Address: _____

2. Business/Organization: _____

3. Address: _____
(Street) (City) (Zip Code)

4. Contact Person: _____

5. Daytime Phone Number: ( ) _____

6. Nonprofit Organization: ☐ Yes ☐ No

NONPROFIT ORGANIZATIONS MAY BE EXEMPT FROM ANY APPLICABLE FEES. THE APPLICANT MUST FIRST FILE A CLAIM FOR EXEMPTION WITH THE CITY OF ALHAMBRA FINANCE DEPARTMENT.

7. Type of Event:

☐ Car Wash ☐ Christmas Tree/Pumpkin Lots ☐ Other: _____

☐ Outdoor Sale ☐ Festival/Fair/Carnival _____

Dates and Times: _____

Describe itmes to be sold and/or activities: _____

_____

8. Will there be any temporary signs: ☐ Yes ☐ No

9. Applicant's signature:

_____ Date: _____

DO NOT WRITE BELOW THIS LINE -- OFFICE USE ONLY

COMMENTS/CONDITIONS: _____

_____

_____

_____

_____

Zone: _____ For Outdoor Sales--Sale is _____ sale of the year

Receipt No.: _____ Planning: _____ Date: _____

Fee: _____ A.R.A.: _____ Date: _____