

CITY OF CARBONDALE, KANSAS
TEMPORARY USE PERMIT APPLICATION

234 Main
P.O. Box 70
Carbondale, KS 66606
Phone: 785.836.7108

Fee: _____

1. Property Owner: _____ Phone: _____

2. Address: _____

3. Description and Location of Temporary Use: _____

4. Date of Temporary Use:
Start: _____ End: _____

5. Name and address (if different than owner) of individual providing services for temporary event.

Name: _____

Address

All provisions of laws and ordinances governing this type of permit will be complied with, whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Applicant _____ Date _____

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