



100 Municipal Circle
Raymore, MO 64083

Phone: 816-331-1803
Fax: 816-331-8067

TEMPORARY USE PERMIT APPLICATION

APPLICANT INFORMATION

CONTACT PERSON: _____

COMPANY: _____

STREET ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ FAX: _____ E-MAIL: _____

EVENT INFORMATION

PLEASE PROVIDE A DESCRIPTION OF THE PROPOSED EVENT:

DATE EVENT WILL BEGIN: _____

DATE EVENT WILL END: _____

DAILY HOURS: _____

NUMBER OF EMPLOYEES AT LOCATION: _____

LOCATION INFORMATION

PROPERTY ADDRESS OR GENERAL LOCATION OF THE ACTIVITY:

LOCATION OF EVENT ON THE PROPERTY (I.E. PARKING LOT):

APPLICANT'S STATEMENT

By signing this application, I acknowledge that:

- I have read and understand the regulations pertaining to my proposed use/event.
- I must obtain a sign permit for any signs displayed on site. Signage is limited to one temporary sign, maximum size 32 square feet in area, 6 feet in height.
- May have to obtain a occupational license from the City Clerk's office.

APPLICANT'S SIGNATURE: _____

DATE: -

SIGNATURE OF APPROVAL: _____

DATE: _____