



**MURRAY CITY SEASONAL USE PERMIT**

Applicant Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Date Issued: \_\_\_\_\_

Business Owner email: \_\_\_\_\_

Duration of Permit: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Purpose of Use Permit: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**CONDITIONS:**

1. The conduct of the requested use will not have any detrimental effects on adjacent properties and will be in general harmony with surrounding uses.
2. The requested use will not create excessive traffic hazards on adjacent streets. There shall be provided sufficient off-street parking which shall be designed to meet all City parking regulations.
3. The applicant shall have sufficient liability insurance for the requested use or event.
4. The applicant shall provide, at his/her own expense, for the restoration of the site of said use to its original condition, including such clean up, washing and replacement of facilities as may be necessary.
5. That said use shall occupy the site for a period determined by the Community and Economic Development Division, not to exceed six (6) months.
6. Pay the Seasonal Use Permit fee of \$50.00.

Business Owner: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Approval Granted By: \_\_\_\_\_ Date: \_\_\_\_\_  
(Murray City Official)

## SEASONAL USE PERMIT

**Submit Application:** For all Seasonal Use Permit applications please submit the following information:

- Completed Seasonal Use application form.
- Property Owner's Authorization Form
- A complete description of the type of business proposed;
- A listing of the individuals who will be engaged in, volunteer, or be employed by the licensee;
- The expected hours of operation of the business;
- The expected number of customers/clients per hour and total expected number per day;
- One (1) copy of a legible site plan showing location of use and indicate areas of parking.
- Provide a copy of sufficient liability insurance for the requested use or event.

\*All plans submitted with the application will not be returned to the applicant and are the property of Murray City.

**PROPERTY OWNER AUTHORIZATION TO CONDUCT BUSINESS**

(This section to be completed by the business owner)

Name of Business: \_\_\_\_\_

Business Owner's Name: \_\_\_\_\_

Business Owner's Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Property Address: \_\_\_\_\_

Detailed Description of Business: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(This section to be completed and signed by the property owner)

Property Owner's Name: \_\_\_\_\_

(Print name)

Property Owner's Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

As the owner of the above listed property, I authorize \_\_\_\_\_  
to conduct the business as described at the address above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_