



Planning & Zoning Department

Temporary Use Permit/Firework Stand Checklist

Staff Use Only		
Project Name: _____		
File Number: _____	Received date: _____	

Nonrefundable Fee: **\$50.00**

Please provide the following required documentation to complete the application

Applicant	Staff	Description
One copy of each of the following		
		A letter of permission from the property owner or lease agreement and permission for use of restroom facilities.
		Access to sanitary facilities must be available. In those cases where sanitary facilities are not provided within the proposed temporary building, the applicant must submit a copy of a written agreement that demonstrates that sanitary facilities are provided somewhere immediately adjacent to the proposed business by another party's building.
		A copy of approved Firework Stand Permit issued by the Fire Department
		A site plan (a "bird's eye view" drawing) that depicts the distances of the proposed temporary use/building from the property lines upon which the temporary use will reside; from any other nearby buildings, streets or alleys, fire hydrants, landscape planters, light fixtures, ground signs, fuel dispensing devices loading areas, service drives/aisles on the same property, handicapped parking and access to the site and building.
		If this application is for a temporary residence to be placed on property while building a permanent home, a Conditional Use Permit is required. In the case of providing for caregiving, a Doctors letter is also required.
		A copy, if available, of the CC&Rs in force for the property upon which the temporary use permit is to be issued. If covenants are no longer in force or do not exist then a statement by the applicant affirming that such is the case shall be required.
		Any other miscellaneous information (e.g., pictures, drawing, letters of support, information articles, etc.) that may be of help to the Director to aid him/her in making a decision.
		Associated fees
		Master Application form

Project description

State the nature of the specific, proposed, request: _____

Desired start date: ___/___/___ Finish date: ___/___/___ Hours of operation: _____

Days of operation: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Solicitors license expiration date: ___/___/___

NOTICE TO APPLICANT

- This application will be reviewed by the Planning Department (and Fire Marshal in case of fireworks stands) with the intent to approve the same, approve it with conditions, or deny the request.
- Please contact the Nampa Fire Department regarding their permits for Fire Works Stands.
- Only one standard permit may be issued for a particular location/property in any given calendar year. However, up to four (4) permits for “seasonal, holiday or event related uses” may be issued on a property in any given calendar year. The duration allowed general retail sales is two (2) weeks at one location. (e.g., rugs, sunglasses, t-shirts, flowers, art/craft items, etc.)
- Temporary uses shall be placed on a noncombustible surface (e.g., dirt, concrete, asphalt) and must be at least twenty-five feet (25') away from combustible materials (e.g., weed patches, board fences, and permanent structures).
- Businesses/persons that do not clean up premises after cessation of the temporary operation may be fined and/or have further issuance of temporary permits suspended by either the Planning and Zoning or Fire Department. By signing the issued permit, the applicant affirms their willingness to maintain the property around the use in a healthy, nuisance-free manner.
- CONDITIONS THAT APPLY TO THIS TEMPORARY USE WILL BE LISTED ON THE PERMIT AT THE TIME OF ISSUANCE.

10-1-12.A.3: Seasonal/Holiday Sales as Temporary Uses:

10-1-12.A.3.a: Locations Allowed: Seasonal/holiday vendors are and shall be prohibited from locating on properties not commercially or industrially zoned and/or in any of the following locations:

10-1-12.A.3.a.i: Location: In any location whereat the City has reasonable grounds to believe that establishment and/or operation of the proposed temporary use would violate covenants, conditions and restrictions of any local subdivision, neighborhood or planned unit development community that has jurisdiction over the area wherein the temporary use permit is proposed to be exercised.

10-1-12.A.3.a.ii: Additional Restrictions for Fireworks Stands: Placement of fireworks stands shall also be required to be in accordance with regulations listed in Title 5 of this code. (Note that other restrictions respecting such stands are also provided in that chapter.)

10-1-12.A.3.b: Duration and Hourly Time Limits: Seasonal/holiday temporary merchandise sales/uses shall be allowed four (4) times per calendar year, once in each quarter of the year (and in addition to any other transient merchant sales allowed on the same property during the year), on lots/parcels in the City according to the following schedule(s):

10-1-12.A.3.b.i: Fireworks stands shall not be erected before June 24 nor remain up after July 5 to sell for the 4th of July holiday nor shall they be erected before December 27 or remain up after January 1 for the New Year holiday and they shall not be allowed to sell merchandise until twelve o'clock (12:00) midnight June 24 through twelve o'clock (12:00) midnight July 5 for the 4th of July holiday nor shall they be allowed to sell merchandise for the New Year holiday until twelve o'clock (12:00) midnight December 26 through twelve o'clock (12:00) midnight January 1 (see title 5 of this code).



Planning & Zoning Department

Master Application

Staff Use Only

Project Name: _____

File Number: _____

Related Applications: _____

Type of Application

- | | |
|---|--|
| <input type="checkbox"/> Accessory Structure | <input type="checkbox"/> Legal Non-Conforming Use |
| <input type="checkbox"/> Annexation/Pre-Annexation | <input type="checkbox"/> Planned Unit Development/MPC |
| <input type="checkbox"/> Appeal | <input type="checkbox"/> Subdivision |
| <input type="checkbox"/> Design Review | <input type="checkbox"/> Short |
| <input type="checkbox"/> Comprehensive Plan Amendment | <input type="checkbox"/> Preliminary |
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Final |
| <input type="checkbox"/> Multi-Family Housing | <input type="checkbox"/> Condo |
| <input type="checkbox"/> Development Agreement | <input type="checkbox"/> Temporary Use Permit |
| <input type="checkbox"/> Modification | <input type="checkbox"/> Fireworks Stand |
| <input type="checkbox"/> Home Occupation | <input type="checkbox"/> Vacation |
| <input type="checkbox"/> Daycare | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Kennel License | <input type="checkbox"/> Staff Level |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Zoning Map/Ordinance Amendment (Rezone) |
| <input type="checkbox"/> Mobile Home Park | <input type="checkbox"/> Other: _____ |

You must attach any corresponding checklists with your application or it will not be accepted

Applicant Name: _____ Phone: _____

Applicant Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Interest in property: Own Rent Other: _____

Owner Name: _____ Phone: _____

Owner Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Contractor Name (e.g., Engineer, Planner, Architect): _____

Firm Name: _____ Phone: _____

Contractor Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Subject Property Information

Address: _____

Parcel Number(s): _____ Total acreage: _____ Zoning: _____

Type of proposed use: Residential Commercial Industrial Other: _____

Project/Subdivision Name: _____

Description of proposed project/request: _____

Proposed Zoning: _____ Acres of each proposed zone: _____

Development Project Information (if applicable)

Lot Type	Number of Lots	Acres
Residential		
Commercial		
Industrial		
Common (Landscape, Utility, etc.)		
Right of Way (internal roadways, ROW to be dedicated, etc.)		
Qualified Open Space		
Total		

Please answer all questions that are relevant to your project

Minimum square footage of structure: _____ Maximum building height: _____

Minimum property size (s.f.): _____ Average property size (s.f.): _____

Gross density: _____ Net density: _____

Type of dwelling proposed: Single-family Detached Single-family Attached

Duplex Multi-family Condo Other: _____

Proposed number of units: _____

Total number of parking spaces provided: _____

% of qualified open space: _____

Additional information may be requested after submittal.

Authorization

Print applicant name: _____

Applicant signature: _____ Date: _____

City Staff

Received by: _____ Received date: _____