



TEMPORARY STRUCTURE PERMIT

CITY OF WAUPACA

Apply for the Permit

Please plan ahead when applying for your permit. We suggest that you apply for the permit a minimum of 2 weeks prior to your start date.

Make sure all of the required information is included and submit to the Department by email: jarod.rachu@waupacawi.gov

Fee: \$250.00





**CITY OF WAUPACA
DEPARTMENT OF INSPECTION
111 S. MAIN STREET
WAUPACA, WI 54981
PHONE: 715-258-4404 · FAX: 715-258-4426**

DATE: _____

APPLICATION FOR COMMERCIAL TEMPORARY STRUCTURE

APPLICANT'S NAME*: _____ **PHONE NO:** _____
MAILING ADDRESS: _____ **EMAIL:** _____
ASSOCIATION TO PROPERTY OWNER: _____

CONTRACTOR'S NAME: _____ **PHONE NO:** _____
LICENSE NO: _____ **EMAIL:** _____
MAILING ADDRESS: _____

PROPERTY OWNER'S NAME: _____ **PHONE NO:** _____
MAILING ADDRESS: _____ **EMAIL:** _____

PROJECT LOCATION:
 Project Address: _____
 Parcel No: _____
 Zoning District(s): _____
 Estimated Cost \$: _____
 Electrical, Plumbing or HVAC included? Yes* No ***Separate permits are required**

PROJECT TYPE:

- Festival
- Outdoor Sale of Seasonal Agriculture
- Outdoor Temporary Merchandise Sales
- Outdoor Greenhouse
- Wedding Tent
- Other Temporary Structure: _____

Will food be served? Yes No
 Will alcohol be served? Yes No

PROJECT SPECIFICS:

Dates Requested: From _____ to _____
 Total Days: _____
 Hours of Operation: _____ am/pm to _____ am/pm
 Tents: No Yes*, Number: _____
 Sizes: _____
***All tents must have a fire rating of NFPA 701**

NOTICE: The City of Waupaca permit only authorizes construction/use pursuant to City ordinances and regulations. The construction/use contemplated by this application may require approvals and/or permits under County or State rules, regulations and ordinances. It is the sole responsibility of the owner/applicant to obtain such approvals/permits. The applicant certifies that the information provided is accurate. A permit is void if issued in error or under a misstatement of fact.

***IF TENANT IS APPLYING FOR PERMIT, A SIGNATURE IS NEEDED FROM PROPERTY OWNER ALLOWING PROJECT.**

APPLICANT'S SIGNATURE: _____ DATE: _____

PROPERTY OWNER'S SIGNATURE: _____ DATE: _____

FOR OFFICE USE ONLY: FEE: _____ PAID: _____ DATE: _____ INITIALS: _____



**Community &
Economic Development**

Community & Economic Development

111 S. Main Street • Waupaca, WI
54981 jarod.rachu@waupacawi.gov
www.cityofwaupaca.org
715.942.9912

APPLICATION for TEMPORARY STRUCTURE OR USE PERMIT

Notice: Please complete the Application in full. The City of Waupaca cannot accept an incomplete Application Form or Application Packet lacking all required information.

Temporary Structure Temporary Use Both

Contact Information (as applicable):

Property Owner: _____

Address: _____

Phone: _____ Email: _____

Applicant* (if different from Property Owner): _____

Address: _____

Phone: _____ Email: _____

*IF TENANT IS APPLYING FOR PERMIT, A SIGNATURE IS REQUIRED FROM PROPERTY OWNER ALLOWING PROJECT.

Developer / Contractor (as applicable): _____

Address: _____

Phone: _____ Email: _____

Electrical Contractor (as applicable): _____

Address: _____

Phone: _____ Email: _____

Plumbing Contractor (as applicable): _____

Address: _____

Phone: _____ Email: _____

Property Description:

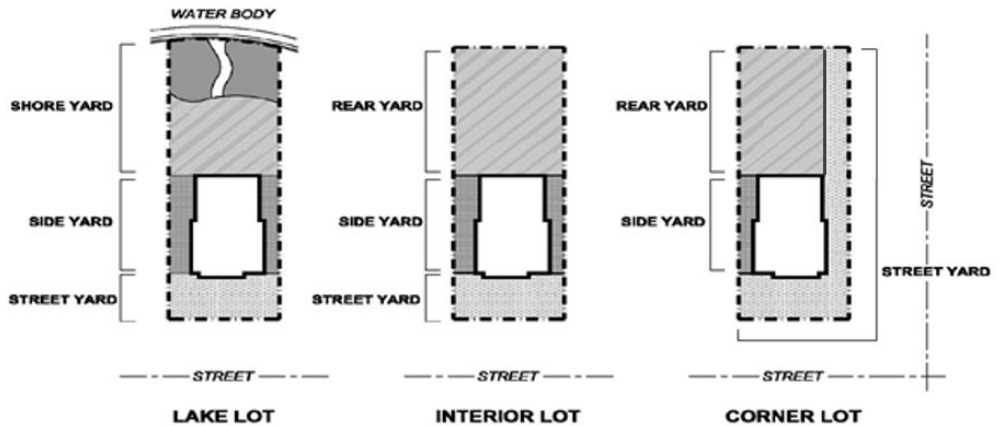
Property Address: _____

Current Use of Property (provide detailed description): _____

The Temporary Use or Structure Permit is requested for the following purposes as provided for in Chapter 17.206 of the City of Waupaca Zoning Ordinance (provide detailed description of intended use of the proposed structure, type of structure and exterior building materials and colors, size of structure including peak height and floor area and location of all entrances).

Duration of Temporary Use or Structure: From: _____ To: _____

Yard
Type
Illustration:

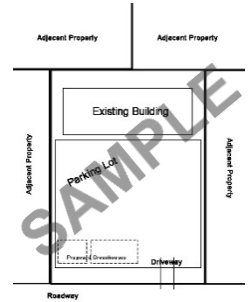


| Included ✓ Yes X No | Temporary Use Submittal Requirements |
|--------------------------|---|
| | Temporary uses which do not include temporary structures will need to include a site sketch showing the extent and location of the proposed use. |
| | Temporary uses which include the use of temporary structures shall complete the site plan per the requirements on page 3 of this application. |

Temporary Structure / Temporary Use Greater Than Two Weeks Requirements

Please label and depict the following on the site plan (can be drawn or printed):

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Physical dimensions of the lot and location of property lines <input type="checkbox"/> Location of all streets and alleys adjacent to the property <input type="checkbox"/> Vision corners (streets and alleys driveways) <input type="checkbox"/> Driveway and parking locations <input type="checkbox"/> Location of All existing structure(s) <ul style="list-style-type: none"> o Primary o Accessory (garage, porch, deck, pool and the like) <input type="checkbox"/> Size of existing structure(s) | <ul style="list-style-type: none"> <input type="checkbox"/> Location of proposed structure(s) <i>indicate as proposed</i> <input type="checkbox"/> Size of proposed structure(s) <input type="checkbox"/> Height of proposed structure(s) <input type="checkbox"/> Visual to proposed structure(s) <input type="checkbox"/> Distance of proposed structure(s) to all property lines and structures from farthest projection point <input type="checkbox"/> Floodplain/Wetland areas (if applicable) <input type="checkbox"/> Location of existing septic tank and drainfield and/or well (if applicable) <input type="checkbox"/> Easements (if applicable) |
|--|---|



Please be aware that restrictive covenants may pose additional regulations.

Please use the space provided for site plan or include as an attachment.

Additional Information:

Additional information, as applicable, shall be included as an attachment to the Application.

It is the Owner's responsibility to determine property line location and location of easements and to ensure proposed structures comply in all respects with the requirements of the zoning ordinance. Any issues that arise are the sole responsibility of the property owner.

Additional plans and data may be required when determined by the Zoning Administrator to be necessary in order to complete a thorough and efficient review. Certain submission requirements may be waived when determined by the Zoning Administrator to be superfluous.

Every property owner and contractor shall maintain all required insurance against any form of liability to a minimum of \$300,000 (per occurrence and aggregate with regard to bodily injury and property damage). The City shall not be held liable if the property/sign owner does not maintain the required insurance per this section and damage is caused by elements of the property in the right-of-way.

Prohibited Structures:

As per Chapter 17.205(1), the following structures are prohibited for use as Temporary Structures: *'Portable storage facilities including shipping containers, portable on demand storage (PODS), store and move (SAM) containers, buses, heavy-duty trucks and their bodies, semi-trailers, freight containers, mobile homes, recreational vehicles and trailers, and any other similar items which are no longer in use for their designated purpose.'*

Commencement of Construction:

No project shall commence construction prior to the issuance of a Site Plan Permit under Chapter 17: Zoning Regulations, a Building Permit under Chapter 14: Building Code, other applicable City of Waupaca permits, or any required State or Federal approvals.

Substantive Changes:

Any substantive change to the use of this parcel and its structures or the addition of new structures shall require an amendment to the authorized site plan.

Other Permits:

The information, data, and plans required in this Application, and the approval, conditional approval, or denial of said Application, are specific to the Zoning Ordinance. Additional approvals may be required under Chapter 14: Building Code, or by the Department of Public Works and other City Departments under applicable chapters of the City of Waupaca Code of Ordinances.

Signature and Certification:

I certify the information presented on this Application and the drawings, plans, and other materials included therein are, to the best of my knowledge, complete and in accordance with the Zoning Ordinance.

Applicant Signature: _____ Date: _____

Consultant Fees:

The City may retain the services of professional consultants (including planners, engineers, architects, attorneys, environmental specialists, recreation specialists, and other experts) to assist in the review of a proposed site plan. The submittal of this Application shall be construed as an agreement to pay for such professional review services applicable to the proposal. The City may apply the charges for these services to the petitioner. The City may delay acceptance of this Application as complete, or may delay final approval, until the petitioner pays such fees. Review fees which are applied to a petitioner, but which are not paid, may be assigned by the City as a special assessment to the subject property. The Petitioner shall be required to provide the City with an executed copy of a professional services reimbursement form as a prerequisite to the processing of the development application.

| OFFICE USE ONLY | | |
|---------------------------------------|------------------------|----------------------------|
| Tax Key No.: _____ | Zoning District: _____ | Lot Size: _____ |
| Fee: _____ | Receipt Number: _____ | Date Paid: ___ / ___ / ___ |
| Ruling: Approved: _____ Denied: _____ | | |