

APPLICATION for a TEMPORARY USE/SPECIAL EVENT PERMIT

**For Office Use Only:**

Permit # _____
Application Fee Waived Date Paid _____ Application Date: _____
Approval/Denial Date _____ Expiration Date (if applicable) _____
11/12/08

NOTE: Representation by the applicant at the meeting is required. The completed application, accompanied by all required information, documents, etc. (six copies ea.) must be submitted to the Town Clerk no less than 45 calendar days in advance of the event opening. Any temporary use permit must be compatible with the Rockville General Plan.

Applicant Information:

Contact Person RYAN GUBLER
Phone No. 435-772-3434

Name RYAN GUBLER

Organization TOWN OF SPRINGDALE Phone No. (435) 772-3434 Fax () _____

Mailing Address 118 LION BLVD SPRINGDALE, UT 84767

Business Reference (if applicable) _____

Address _____ Phone No. () _____ Fax No. () _____

Liability Insurance naming the Town of Rockville as an insured:

Policy # 13970 Amount 5,000,000 Carrier UTAH LOCAL GOVERNMENTS TRUST

Project or Temporary Use Information:

- ☐ Attach cover letter describing the temporary use in detail.
- ☐ The scheduled date(s) of the temporary use.
- ☐ The scheduled end date of the temporary use and date on which all occupancy and temporary structures will be removed MONDAY, NOV. 15, 2021.
- ☐ Anticipated attendance 450 + SPECTATORS

Site Information:

- ☐ Street address/location SR-9, BRIDGE RD., GRAFTON
- ☐ Attach a copy of legal description of property where the temporary use will be held.
- ☐ Attach a notarized authorization from property owner, if different from applicant.
- ☐ Attach plans and drawings, to scale, showing location and uses of all temporary structures, parking areas, signs and other appropriate information to describe the site.

Special Requirements (to be provided by applicant):

	YES	NO
☐ Water	☒	☐
☐ Electrical	☒	☐
☐ Portable Toilets	☒	☐
☐ Trash Dumpsters	☒	☐

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☐ First Aid Station



☐ Traffic Control



☐ Parking Plan



☐ Fire Protection



☐ Law Enforcement



For all YES answers please describe how the requirements will be met

WATER STATIONS WILL BE LOCATED ON RACE ROUTE AND AT GRAFTON, GENERATOR AT
GRAFTON, TOILETS ALONG ROUTE AND AT GRAFTON, GARBAGE RECEPTACLES ALONG ROUTE AND
AT GRAFTON, AID STATIONS ALONG ROUTE AND AT GRAFTON, TRAFFIC CONTROL, LAW ENFORCEMENT
AND PARKING PLAN PROVIDED BY SPRINGDALE P.D., FIRE PROTECTION FROM H.V. FIRE DISTRICT

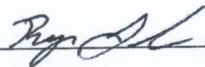
Special Conditions of Temporary Use Permit:

- ☒ The temporary use will not create a hazard to the community.
- ☒ The existing right(s)-of-way will not be compromised at any time.
- ☒ All areas will be restored to conditions existing prior to the temporary use.
- ☒ Total liability for damages associated with the temporary use are that of the applicant.
- ☒ Dangerous materials will not be used or stored at the temporary use location.
- ☒ All appropriate licenses/permits will be secured by applicant prior to start of temporary use to include sales or service of alcohol, food, goods or other services.
- ☒ Other conditions deemed appropriate by the Town of Rockville.
- ☒ A performance bond may be required.

APPLICANT CERTIFICATION:

I certify under penalty of perjury that this application and all information submitted as a part of this application is true, complete and accurate to the best of my knowledge. I also acknowledge that I have reviewed the Town Ordinances and that items and checklists contained in this application are basic and minimum requirements only and that other requirements may be imposed that are unique to individual uses. I agree also to comply with any and all applicable Town Ordinances in effect at this time. Should any of the information or representations submitted in connection with this applicant be incorrect or untrue, I understand that Rockville Town may rescind any approval, or take any other legal or appropriate action. I also agree to allow the Planning Commission, Town Council, or appointed agent(s) of the Town to enter the subject property, with reasonable notification, to make any necessary inspections. I have checked each item or indicated N/A for items that do not apply, and have insured that my plans and application are complete.

Signature



Date 7-8-2021

Approval:

Planning Commission Approval: _____ Date _____

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