



CITY OF HAYSVILLE

PO Box 404
200 W. Grand
Haysville, KS 67060
Phone: 316/529-5900 | Fax: 316/529-5925
www.haysville-ks.com

**Temporary Portable
Business Permit
Application**

APPLICANT INFORMATION

| | |
|--------------------|------------------|
| Full (Legal) Name: | Phone: |
| Mailing Address: | Alternate Phone: |
| City, State, ZIP: | Email: |

BUSINESS INFORMATION

| | |
|------------------------------------|-------------------|
| Registered Business Name: | KS Sales Tax #: |
| DBA Name: | Phone: |
| Mailing Address: | City, State, ZIP: |
| Nature of Business/Items for Sale: | |

PROPERTY LOCATION INFORMATION

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| Temporary Use Address (Location): | |
| Relationship of Applicant to Property is: <input type="checkbox"/> Owner <input type="checkbox"/> Lessee <input type="checkbox"/> Other _____ | |
| Owner Name: | Owner Phone: |
| Has the owner given permission for temporary portable business to use the property? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please show a signed letter from the owner stating as such. | |
| Date(s) permit requested (Temporary permits may not exceed 30 days): | |

APPLICANT MUST INCLUDE:

- A drawing which depicts the proposed location of the temporary portable business in relation to the lot. Please use are on back and include all items listed.
- Payment of the \$50.00 fee.

I, _____, the applicant, or individual legally authorized to sign for the corporation or partnership, state that upon signing this application, I understand and agree to the statements above and to the provisions set forth in Chapter 5 of the Haysville Municipal Code and certify that the information and answers herein contained are complete and true to the best of my knowledge.

Signature of Applicant

Date

The following area is provided for your site plan. It must include:

- (1) Proposed square footage of the area used _____.
- (2) The number of parking spaces that will remain available for the primary business use _____.
- (3) The number of parking spaces to be used by the temporary portable business _____.
- (4) Measurements of the setback from property lines.
- (5) Size and location of any signs used for the purposes of the business.

| OFFICE USE ONLY | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------|------------------|------------------|
| Date/Time Application Received: _____ | | Fee: _____ | | Receipt #: _____ |
| | Approved | Disapproved | Reason | Date |
| Building Inspector | | | | |
| Chief of Police | | | | |
| Zoning Administrator | | | | |
| City Attorney | | | | |
| The information provided on this application and attached hereto is found to be complete and satisfactory in accordance with the requirements of Chapter 5, Article 12 of the Haysville Municipal Code and a permit may hereby be issued. | | | | |
| City Clerk or Designee: _____ | | | Permit #: _____ | |
| Issue Date: _____ | Start Date: _____ | Term: _____ | Exp. Date: _____ | |