



Planning & Zoning

#### ADMINISTRATIVE REVIEW APPLICATION

### Type of Review Requested (check all that apply) ☐ Administrative Determination STAFF USE ONLY: ☐ Business Permit File number(s): ☐ Certificate of Compliance ☐ Design Review – City Center ☐ Home Occupation Project name: \_\_\_\_\_ ☐ Mobile Food Unit ☐ Lot Line Adjustment Date filed: Date complete: ☐ Simple Lot Split X Temporary Use Related files: ☐ Time Extension/Renewal ☐ Transient Merchant Other \_\_\_\_\_ **Subject Property Information** Address: Parcel Number(s): Subdivision: \_\_\_\_\_ Block: \_\_\_\_ Lot: \_\_\_\_ Acreage: \_\_\_\_ Zoning: \_\_\_\_ Prior Use of the Property: Proposed Use of the Property: **Applicant Information:** Applicant Name: \_\_\_\_\_\_ Phone: \_\_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_ \_\_\_\_\_\_ Phone: \_\_\_\_\_ Property Owner Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_ Agent Name: (e.g., architect, engineer, developer, representative) Address: \_\_\_\_\_ City: \_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_ **Authorization** Print applicant name:

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





## Planning & Zoning

TEMPORARY USE

Business Name: File #:			File #:	
Applicant/Agent:				
Applicant (√)	Please provide the following REQUIRED documentation:			Staff (√)
	Completed & signed Administrative Review Application			
	Narrative fully describing the proposed use/request			
	Property Owner Acknowledgement (if applicable)			
	Vicinity map, showing the location of the subject property			
	Site Plan (8 ½" x 11"): The following items must be shown on the site plan:			
	<ul> <li>Parking lot design &amp; driveway access</li> </ul>	• Existing & propos	sed structures	
	<ul> <li>Placement of the Temporary Use</li> </ul>	<ul> <li>Location of table</li> </ul>	s, chairs, trash, etc.	
	Traffic circulation for ingress & egress			
	Show the setback measurement from the structure to the property line			
	Square feet of the structure			
	Copy of current SWDH (Southwest District Health) Permit (if applicable)			
	Copy of current vehicle registration and current proof of insurance (if applicable)			
	Photograph of the Temporary Use			
	Completed & signed Statement of Compliance			
	Fee			

The applicant shall comply with City Code: Chapter 10-02-13 at all times. Any violations of City Code shall render any approvals null and void.

#### \*ALL FACILITIES ASSOCIATED WITH THE TEMPORARY USE MUST BE REMOVED UPON EXPIRATION\*

P&Z STAFF USE ONLY:		
Start Date: End Date:		
Comments:		
Reviewed by:		
BUILDING STAFF USE ONLY:		
□ Approve □ Approved w/ Conditions □ Deny		
Comments:		
Reviewed by:		

FIRE DEPT. STAFF USE ONLY:			
□ Approve □ Approved w/ Conditions □ Deny			
Comments:			
Reviewed by:			



# CITY OF Galdwell, Idaho

Planning & Zoning

TEMPORARY USE STATEMENT OF COMPLIANCE

Address of Proposed Temporary	Use:

I agree to operate the Temporary Use consistent with the standards set forth by the City of Caldwell. Those regulations are listed in City Code Section 10-02-13 and include (but are not limited to) the following:

- A. All signage shall not be located within a vision triangle, sidewalk, public right-of-way, or street landscape buffer area. Off-premise signage is prohibited.
- B. The proposed use shall be in conformance with uses allowed in the underlying zone.
- C. Applicants who will serve food or beverages shall first procure a permit from the Southwest District Health Department to ensure compliance with applicable health regulations.
- D. All Temporary Uses shall be maintained in compliance with all applicable City, county, state, and federal regulations, including without limitation fire, building, and electrical codes as well as health regulations.
- E. Temporary Uses shall be located on a non-combustible surface and must be at least twenty-five (25) feet away from combustible materials.
- F. Temporary Uses shall not exceed 12 feet in height; 30 feet in length; 9 feet in width.
- G. Business hours shall be between the hours of 8 AM and 10 PM and the business shall be conducted in a manner that does not create excessive noise, light, dust, nuisance or other detriment to the quiet enjoyment of property in the vicinity.
- H. Any BBQ grill/range associated with a Temporary Use must be enclosed and permanently built into the temporary use facility. A range/hood fire suppression system must be utilized, unless alternate mitigation is approved by the Fire Department.
- I. Temporary Uses must at all times be parked in a legal manner. Vending operations shall be conducted only to pedestrians unless drive up service is permitted by the Planning and Zoning Director or his/her designee.
- J. Temporary Uses must provide a sanitary sewage treatment plan. Wastewater may not be dumped or discharged on the premises, adjacent properties, or public right-of-way.
- K. All Temporary Uses shall be required to pass a Fire Safety inspection before opening for business.
- L. Temporary use facilities shall not move from the site during the course of their approved time period unless it is to refill fluids such as propane, or similar, necessary for the operation of the business or for other necessary repairs or maintenance to the vehicle that are unable to be made on site. The Planning and Zoning Department must be notified at least one business day prior to movement and shall be given the reason for the movement, how long the vehicle will be away from the site and when the vehicle will return to the site. The vehicle must return to the site in conjunction with the time frame given to the Planning and Zoning Department and return to the site in the exact location as it was previously.
- M. Once a temporary use license has expired, the facility shall be removed from the property on which it operated and shall not be replaced or relocated unless a new temporary use license application has been submitted and approved by city staff.

I have read and understand the above standards, and certify that I will conduct my business in accordance with these standards. Violation or non-compliance of any of these requirements will result in immediate revocation of the certificate unless there are extenuating circumstances as determined and approved by the Planning and Zoning Director or his/her authorized designee.

App	licant's signature	•	Date:

# Property Owner Acknowledgment

l,		, the	e recorded owner for real property		
addressed as			, Suite #,		
City	State	Zip	, am aware of, in agreement with,		
and give my permission to			, to submit the		
accompanying application(	s) pertaining the	that property.			
claim or liability resulti	I agree to indemnify, defend and hold the City of Caldwell and its employees harmless from any claim or liability resulting from any dispute as to the statement(s) contained herein or as to the ownership of the property which is the subject of the application.				
2. I hereby grant permissi site inspection(s) relate	•		er the subject property for the purpose of ).		
Dated this	_ day of		, 20		
		(Si	gnature)		
	CERTIF	FICATE OF VERIFIC	CATION		
STATE OF IDAHO )					
County of Canyon )	SS.				
l,			, a Notary Public, do hereby certify that		
on this day of _	·	, in the year	, personally appeared before me		
			entified to me to be the person whose		
name is subscribed to the	e foregoing ins	trument, who, b	eing by me first duly sworn, declared that		
he/she/they signed the f	oregoing docur	ment, and that th	ne statements therein contained are true.		
NOTARY PUBLIC FOR IDAHO	)				
Residing at					
My Commission Expires					