



TOWN VIRGIN
 114 S. Mill Street
 PO Box 790008
 Virgin, UT 84779
 (435) 635-4695, fax 635-0265

TOWN USE ONLY		
Application Fee: \$100.00 (non-refundable)		
Date Paid: _____	Check #: _____	Staff Initials: _____
Deposit Paid: _____	Check #: _____	Staff Initials: _____
Permit Fee: \$ _____	Date Paid: _____	Check #: _____
Deposit Refunded: _____	Check #: _____	Staff Initials: _____

Temporary Use Permit Application

NAME: _____

ORGANIZATIONAL AFFILIATION: _____

STREET ADDRESS: _____

MAILING ADDRESS: _____

E-MAIL ADDRESS: _____

HOME NUMBER: _____ CELL: _____ FAX: _____

NUMBER OF ATTENDEES (competitors, audience, and vendors): _____

SITE INFORMATION. LOCATION OF PROPOSED TEMPORARY USE: _____

STREET ADDRESS: _____

NUMBER OF ATTENDEES (i.e. Participants, Spectators, vendors and Staff): _____

PROJECT OR EVENT DESCRIPTION. BRIEFLY DESCRIBE THE PROPOSED USE:

NAME & PHONE # OF THE WATERING COMPANAY: _____

Anticipated date of the event or installation of temporary structures: _____

Anticipated date the event or temporary structures be removed: _____

*****Applicant must supply proof of insurance and copies of any additional permits pertaining to this event provided by BLM, County, and etc.*****

APPLICANT CERTIFICATION

I certify that the information contained in this application is true and correct.

Printed Name: _____

Signature: _____ Date: _____

Approved by: _____ Date: _____

