City of Colleyville
100 Main Street
Colleyville, TX 76034
817 - 503 - 1030 FAX 817-503-1039

APPLICATION FOR A TEMPORARY USE PERMIT

(Please print clearly)

Part 1 Property information

Street Address:	*Proposed Use:*
Beginning Date:	*Expiration Date:*
Name of Contractor or Applicant:	*Address of Applicant*

Part 2. Description of Use Proposed

Describe the activities being proposed:

Part 3. Additional Information

Required documents:

- ☐ *Attach a site plan showing the proposed location*
- ☐ *Signature or letter of authorization from property owner*

Part 4. Contact Information	Part 5. Property Owner Authorization
Name of contact person:	*Name of property owner:*
Contact phone number:	*Property owner phone number:*
Contact E-Mail address:	*Property owner address:*
Signature of contact person:	*Signature of property owner or provide letter of authorization:*

Part 6. For Office Use Only

Reviewed by:	*Permit Approved:*	*Permit Fee:*
_____ *Fire Dept.* _____ *Police Dept.* _____ *Bldg. Insp.*	☐ *Yes* ☐ *No*	

Comments & Special Conditions: _____