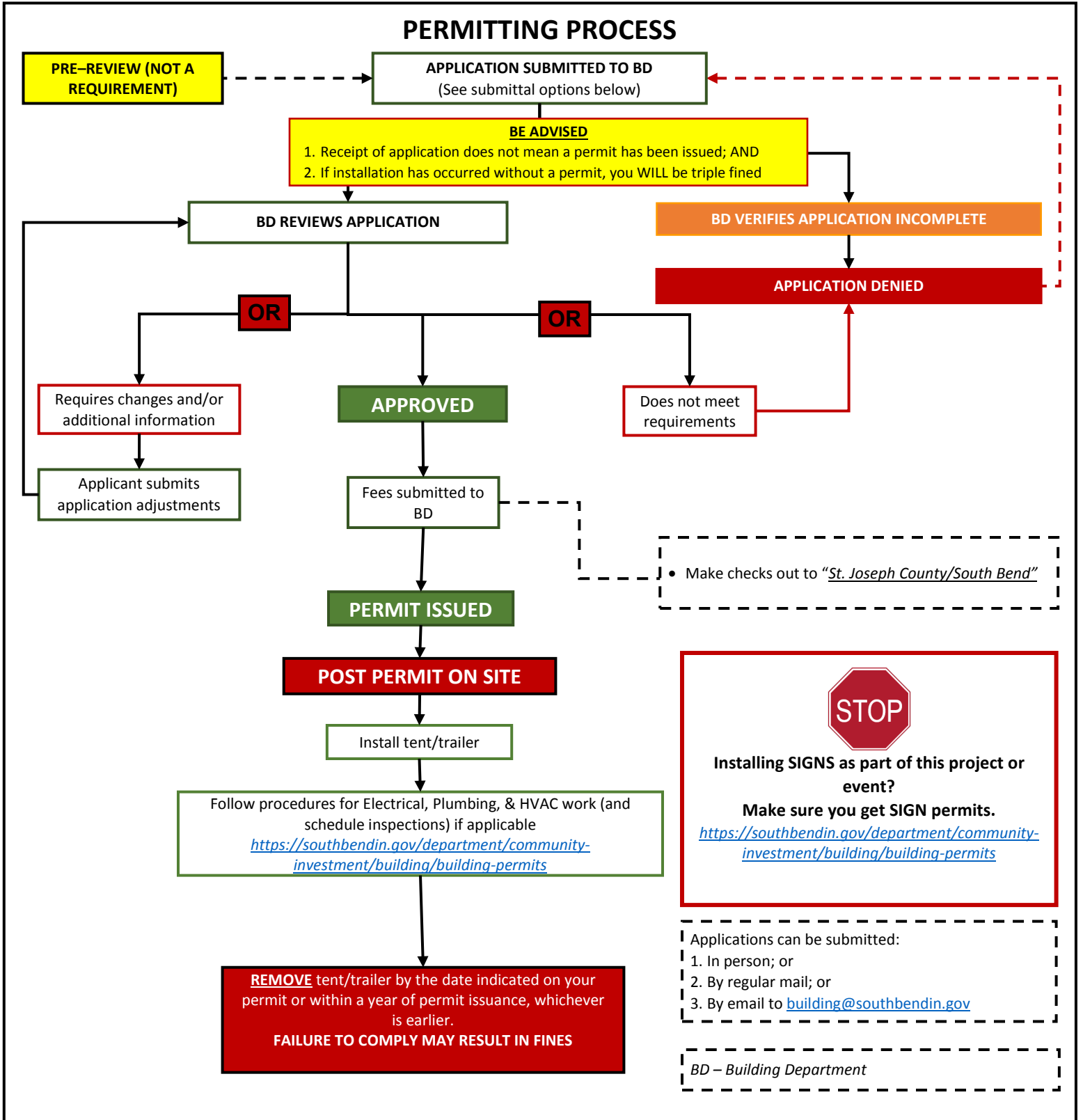


St. Joseph County | City of South Bend
BUILDING DEPARTMENT
COMMERCIAL TEMPORARY TRAILER APPLICATION





COMMERCIAL TEMPORARY TENT/TRAILER/ACCESSORY APPLICATION
 ST. JOSEPH COUNTY | CITY OF SOUTH BEND | BUILDING DEPARTMENT

PAYMENT:
 CHECK # _____
 CARD
 CASH

COMMERCIAL TEMPORARY TRAILER PERMIT CHECKLIST

- 1. Completed Application
 (IF APPLYING FOR MULTIPLE TRAILERS, SUBMIT A SEPARATE APPLICATION FOR EACH STRUCTURE)
- 2. Site plan showing:
 - a. ALL property dimensions
 - b. size and location of ALL existing structures
 - c. parking spaces AND their dimensions after installation of proposed trailers;
 - d. parking calculation
 - e. location of septic system(s) and well(s) (if applicable)
 - f. size and location of ALL proposed tents/trailers
 - g. setbacks of all proposed tents/trailers from property lines, existing buildings, well and septic systems;
 - h. if parcel is under 3 acres, it must be drawn to scale
 - i. An example of a site plan can be found here: <https://southbendin.gov/wp-content/uploads/2018/08/Example-of-Site-Plan.pdf>
- 3. Special use/exception and/or variance approvals if applicable
- 4. All applicable contractors involved in the project-building, electrical, plumbing, and HVAC. (on application form)
- 5. Application fee **SEE FEE SCHEDULE FOR APPLICABLE PERMIT FEES
- 6. Be sure to provide the Indiana State Seal Number for each trailer (on application form); see example:



USEFUL LINKS

- ✓ City of South Bend Zoning/Variance Applications <http://southbendin.gov/zoning>
- ✓ St. Joseph County Zoning/Variance Applications <http://www.sjcindiana.com/306/Division-of-Planning-Zoning>

PROPOSED PROJECT

ADDRESS:

| | | | |
|---------|------|-----|----------|
| Address | City | Zip | Township |
|---------|------|-----|----------|

ZONING:

| | | | | | | |
|-------|----------------------|--------------------------|--------------------------|---------------------------|--------------------------|--------------------------|
| _____ | OVERLAY/NNZO: | <input type="checkbox"/> | <input type="checkbox"/> | HISTORIC DISTRICT: | <input type="checkbox"/> | <input type="checkbox"/> |
| | | Yes | No | | Yes | No |

PROPERTY OWNER:

PHONE NUMBER:

EMAIL:

MAILING ADDRESS:

| | | | |
|---------|------|-------|-----|
| Address | City | State | Zip |
|---------|------|-------|-----|



COMMERCIAL TEMPORARY TENT/TRAILER/ACCESSORY APPLICATION
 ST. JOSEPH COUNTY | CITY OF SOUTH BEND | BUILDING DEPARTMENT

PERMIT TYPE: NEW RENEWAL

START DATE

END DATE

TOTAL DAYS IN USE

“Seasonal retail sales uses shall not exceed forty-five (45) consecutive days per occurrence nor a total of one-hundred and twenty (120) days during any calendar year” § 21-03.11(b)(6)(E), and § 154.071(F)(5). In this case each 45 day or part thereof will be charged a separate permit fee.

STRUCTURE TYPE & PURPOSE: TENT TRAILER OTHER

PURPOSE/USE

PARKING

Parking spaces taken by temporary structure

Additional parking spaces provided for temporary use

STATE SEAL NUMBER

Parking calculation required on site plan if additional parking is NOT being provided OR spaces for existing uses are being used by temporary structure(s). Minimum of 3 parking spaces must be dedicated to each temporary structure.

EXISTING

STRUCTURES:

Primary Structure (sq/ft)

Accessory Buildings (sq/ft)

Other (sq/ft)

PROPOSED SETBACKS OF TEMPORARY STRUCTURE:

Front Lot Line (ft)

Side Lot line (ft)

Side Lot line (ft)

Rear lot line (ft)

Other (ft)

BUILDING

CONTRACTOR:

OR

OWNER AS CONTRACTOR

PHONE:

EMAIL:

ADDRESS:

Address

City

State

Zip

***Application can be emailed to us at building@southbendin.gov or provided to the address below for review.**

***Application must be signed below.**

I certify the above to be a true and accurate to the best of my knowledge.

APPLICANT SIGNATURE

DATE

PRINT NAME

ORG/BUSINESS OR OWNER

PHONE

EMAIL