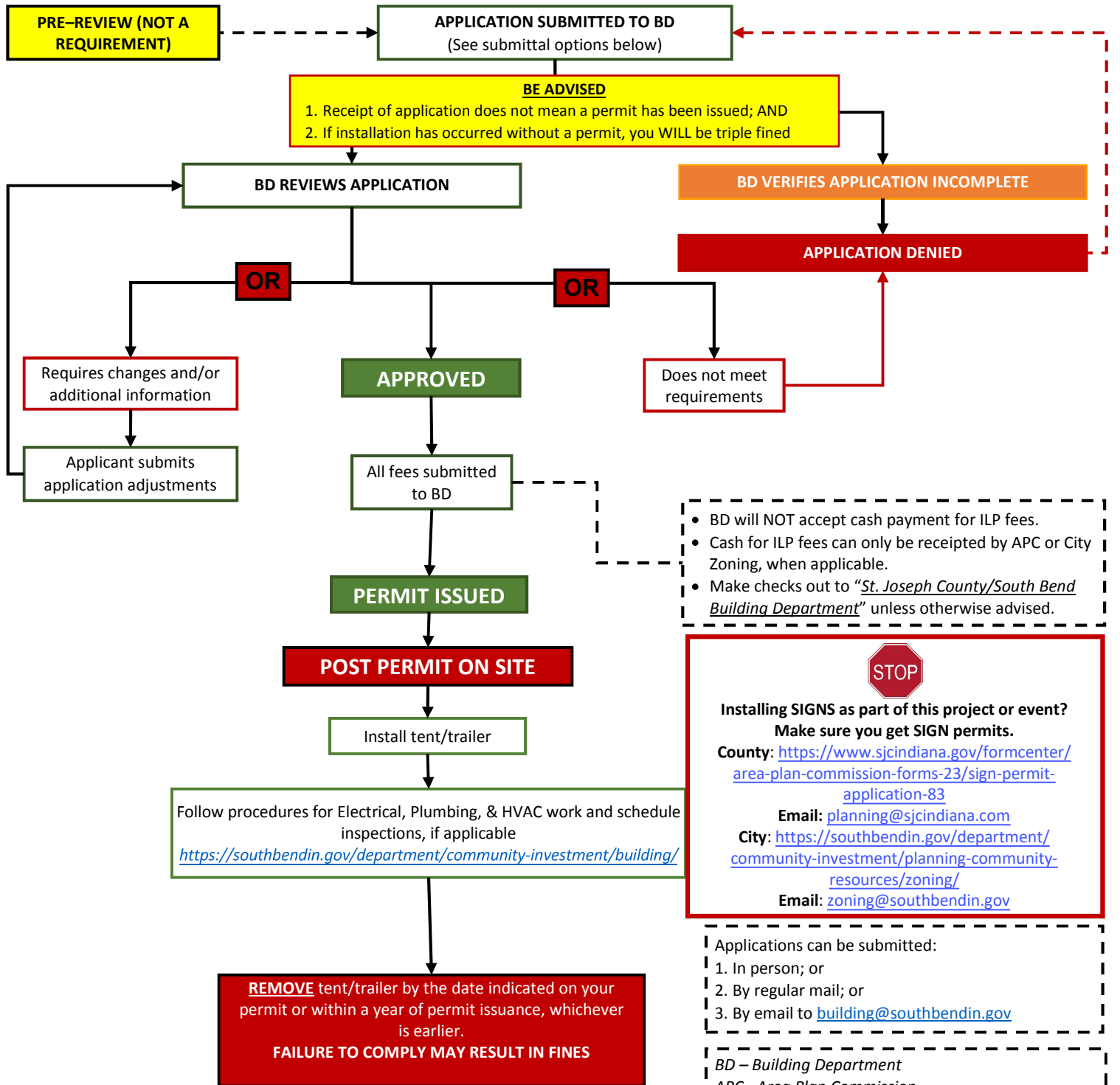


St. Joseph County | City of South Bend
BUILDING DEPARTMENT
CITY RESIDENTIAL TEMPORARY TENT/TRAILER/ACCESSORY APPLICATION

PERMITTING PROCESS





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

PAYMENT:
CHECK # _____
CARD ☐
CASH ☐

TEMPORARY TENT/TRAILER/ACCESSORY PERMIT CHECKLIST

- ☐ 1. Completed Application
(IF APPLYING FOR MULTIPLE TENTS/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 tent/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>

PROPOSED

PROJECT

ADDRESS:

_____	_____	_____	_____
Address	City	Zip	Township
_____	_____	_____	
Subdivision	Section of Subdivision	Lot Number	

PROPERTY OWNER:

PHONE NUMBER:

EMAIL:

MAILING ADDRESS:

_____	_____	_____	_____
Address	City	State	Zip



CITY RESIDENTIAL 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