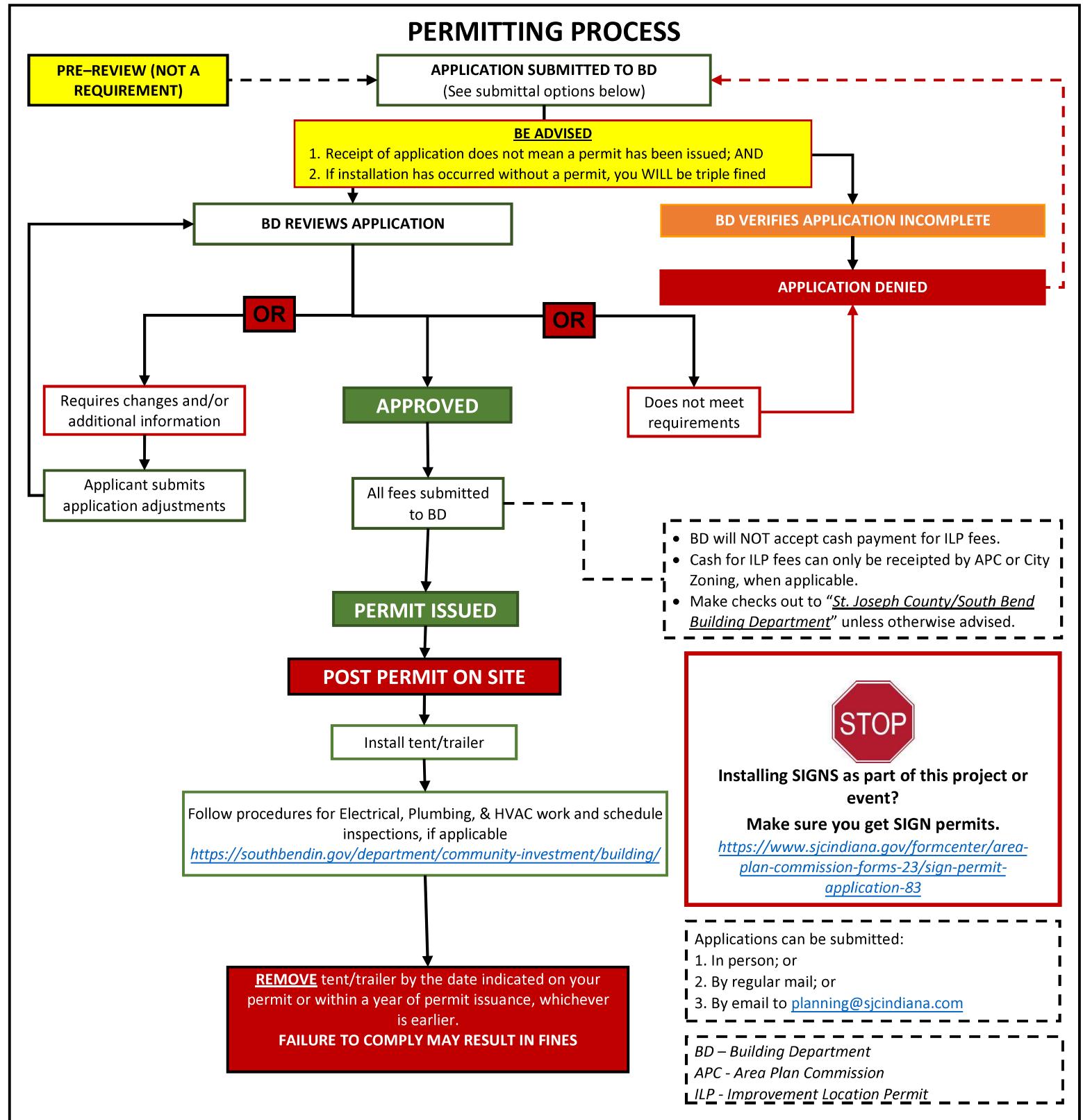


St. Joseph County | City of South Bend  
**BUILDING DEPARTMENT**  
**COUNTY RESIDENTIAL TEMPORARY TENT/TRAILER/ACCESSORY APPLICATION**





## COUNTY RESIDENTIAL TEMPORARY TENT/TRAILER/ACCESSORY APPLICATION

ST. JOSEPH COUNTY | CITY OF SOUTH BEND | BUILDING DEPARTMENT

**PAYMENT:**  
CHECK #   
CARD   
CASH

\*WE DO NOT ACCEPT AMERICAN EXPRESS  
\*EXACT PAYMENT MAY BE REQUIRED IF WE ARE UNABLE TO MAKE CHANGE FOR CASH PAYMENTS

### 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/2025/03/SITE-PLAN-TO-SCALE.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



- ✓ St. Joseph County Zoning/Variance Applications <http://www.sjcindiana.com/306/Division-of-Planning-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

EXCELLENCE I ACCOUNTABILITY I INNOVATION I INCLUSION I EMPOWERMENT

215 S. Martin Luther King Jr. Blvd. | Suite 100 | South Bend, IN 46601 | p. 574.235.9554 | f. 574.235.5541 | [www.southbendin.gov](http://www.southbendin.gov)



**COUNTY 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](mailto: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** \_\_\_\_\_

**EXCELLENCE I ACCOUNTABILITY I INNOVATION I INCLUSION I EMPOWERMENT**