

ſ

STREET ADDRESS OF TEMPORARY SALES AND SERVICE USE:				
	APPLICANT INFORMATION	ı		
Name:	Company/Orgar	Company/Organization:		
Street Address:	Phone Number:	Phone Number:		
City:	State:	Zip:		
Email Address:				
Street Address of Temporary Sales and Se	ervice location:			
PR	OPERTY OWNER INFORMA	TION		
Name:	Company/Orgar	nization:		
Email Address:	Phone Number:			
Street Address:	City:	State & Zip:		
(for all matters	CONTACT INFORMATION relating to the temporary sales and	service activity)		
Contact Name:	Contact telephone:			
	Contact Email address:			

REQUIRED INFORMATION				
	Scaled drawing that shows the proposed site and placement of structures associated with the temporary sales and service activity. Required parking for the principal use on the property cannot be utilized.			
	Dimensions of area to be occupied by the activity (cannot exceed 7,500 square feet)			
	Plans for rubbish management indicated on the drawing.			
	Days and hours of operation of activity.			
	Affidavit and Acknowledgement of Property Owner (the Township offers notary services)			
Has Applicant previously received a permit for a temporary sales and service in the Township?				
	Yes. If yes, give address:			
	No			
The permit is valid for 30 consecutive days. Requested begin date of and expiring on				
Prior to expiration of the permit, the Permitee may voluntarily cancel the permit by providing				
written notification to the Zoning Administrator. Otherwise, the permit may be renewed a single time for no more than 30				
additional consecutive days in the same calendar year on the same property and must be filed with the Township not later				
than five (5) days before the permit expires. If the permit expires and is not renewed, the temporary sales and service				
activity must cease within three (3) days after expiration of the permit. A Building Permit may be required for				
structures/tents exceed 200 square feet in area. Applicant is responsible for securing all necessary permits.				
Applicant Sig	nature: Date:			
Property Own	er Signature : Date:			

٦

Г

Township Use Only:				
Permit Issued:	Is this a Ren □ Yes □ No	ewal?		
Permit Number: Other permits issued for this site this year for other applicants? Expiration: Image: Yes: Date field inspection to verify site compliance: No				
*Temporary Sales and Service Permit Application will not be reviewed without payment of required fee(s). Note that a separate building permit may be necessary in addition to this permit. Fee: \$100 Each New Application \$50 Renewal at an existing/former location same calendar year		Cash/Receipt # (If any): Check No.: Initials:		
If Revoked or Cancelled:				
Revocation date, if applicable:	Cancellation	date, if requested by Permitee:		

AFFIDAVIT AND ACKNOWLEDGEMENT OF PROPERTY OWNER

GIVING PERMISSION TO LOCATE A TEMPORARY SALES AND SERVICE

STATE OF MICHIGAN)
) SS.
COUNTY OF KALAMAZOO)

I, ______, after being duly sworn, submit this affidavit in support of giving permission to locate a temporary sales and service use on real property and state as follows:

- 1. I am (check applicable line below):
 - _____ owner of the real property located at ______, Comstock Township, Michigan.
 - ____ an officer, director, member or manager of an entity owning the real property located at ______, Comstock Township, Michigan.

2. The operator of a temporary sales and service at ______

has requested permission to place a temporary sales and service on the property owned by me or the entity I represent in the location as shown on the drawing attached as Exhibit A.

3. I understand that in addition to the temporary sales and service operator(s), the property owner is also responsible for a) ensuring the requirements of the Comstock Charter Township Ordinances are met, b) the maintenance of the temporary sales and service use and the area surrounding it is kept free from any junk, debris or other material, c) violation of any provision of the Township Ordinance, and d) payment of any fines and costs of abatement, which if not paid, shall be placed on the property as a tax lien

4. As the owner of the property described above or as an officer, director, member or manager thereof, I give permission to place a temporary sales and service use on the property by the operator named above.

DATED: _____, 20____.

On this ______ day of ______, 20___, before me, a Notary Public, in and for said County, personally appeared ______, to me known to be the same person described in and who executed the within instrument, who acknowledged the same to his free act and deed.

Notary Public			
County, Michigan			
My Commission Expires			
Acting in	County, Michigan		

S:_01-FORMS-TEMPLATES\1j Temporary Sales and Service Affidavit and Acknowledgement from Property Owner.doc