



TEMOPRARY OUTDOOR ACTIVITY APPLICATION

65 Lawrenceville Street, Norcross, Georgia 30071 Tel: 678-421-2027

PROPERTY OWNER'S INFORMATION

Owner's Name: _____

Owner's Address: _____

Suite: _____ City: _____ State: _____ Zip Code: _____

Phone: _____ Cell Phone: _____ Email: _____

APPLICANT'S CONTACT INFORMATION

Owner's Name: _____

Owner's Address: _____

Suite: _____ City: _____ State: _____ Zip Code: _____

Phone: _____ Cell Phone: _____ Email: _____

PROPERTY LOCATION

Tax Parcel Number(s): _____ Zoning: _____ Size in Acres: _____

Address(es): _____

TEMPORARY OUTDOOR ACTIVITIES DESCRIPTION

Briefly, yet accurately, describe the outdoor activity to occur within the City of Norcross at the above address. Use additional pages as needed. _____

ADDITIONAL INFORMATION

- Start Date: _____ Finish Date: _____ (10 Day Maximum)
- Date of last outdoor activity at this location: _____
- Is this event for a charitable or nonprofit cause? Yes No
- Is this event considered a Federally recognized holiday or part of Halloween? Yes No
- Is this event scheduled to take place on a parcel of land less than 2 acres in size? Yes No
- Will any equipment, vehicles, tables, etc., be located within 50ft of any property line? Yes No
- Will this event occupy any parking spaces? Yes No
- Will any portion of this event be located on grassed or landscaped areas? Yes No
- Will mobile food services or food preparation occur during this event? Yes No
- For carnivals, will the event or equipment be located within 500ft of a residential property line? Yes No

REQUIRED ATTACHMENTS

- Survey indicating location of event
- Business license application
- Review fee of \$50.00
- Proof of non-profit or charity status

Property Owner's Signature Date

Before me, the undersigned notary public, this day, personally, appeared _____ to me known, who being duly sworn according to law, deposes the following:
Subscribed and sworn to before me this _____ day of _____, 20__.

Notary Public

Applicant's Signature Date

Before me, the undersigned notary public, this day, personally, appeared _____ to me known, who being duly sworn according to law, deposes the following:
Subscribed and sworn to before me this _____ day of _____, 20__.

Notary Public

CITY USE ONLY. DO NOT WRITE BELOW THIS LINE.

Date received: _____ Receipt Number: _____ Application Number: _____ Fee Paid \$ _____