



## Community Development Department

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City of Snoqualmie  
38624 SE River St. | PO Box 987  
Snoqualmie, Washington 98065  
(425) 888-5337 | [www.snoqualmiewa.gov](http://www.snoqualmiewa.gov)

### TEMPORARY USE PERMIT APPLICATION

A temporary use permit is a mechanism by which the city may permit a use that, when properly regulated and active for a limited and temporary period of time can be compatible, or otherwise limited in impact to neighboring properties and the general community. Refer to [Chapter 5.36](#) and [Chapter 17.55.050](#) of the Snoqualmie Municipal Code (SMC) for more information.

#### **TEMPORARY USE PERMIT SUBMITTAL REQUIREMENTS:**

1. Completed Application Form (see Page 3)
2. Site Plan
3. Mobile Food Service Business Permit (if applicable)
4. Mobile Food Vehicle Preparation Inspection Form (if applicable)
5. Type C Right-Of-Way Use Application (if applicable)
6. Application Filing Fee or Deposit

1. **Completed Application Form.** (See Page 3).
2. **Site Plan.** The plans shall include the following information, where applicable:
  - A. **Identifying Information.** Name, address, and phone number of the person who prepared the drawing, location of the work, date drawn, and existing parcel number(s).
  - B. **General Vicinity.** Location on a vicinity map including roadways and needed parking spaces.
  - C. **Buildings.** Dimensions of tent or cart showing setbacks from buildings and streets.
3. **Mobile food service business permit. (if applicable)** Please check the King County Mobile Food Service Business Permit [website](#) for details on how to obtain.
4. **Mobile Food Vehicle Preparation Inspection Form (if applicable)**
5. **Type C Right-Of-Way Use Application. (if applicable)** Only needed if temporary use is blocking the public right of way.
6. **Application Filing Fee or Deposit.**

# TEMPORARY USE PERMIT APPLICATION

Property Owner	
Name:	Phone:
Address:	
Email:	
Applicant	
Name:	Phone:
Address:	
Email:	
Project Details	
Temporary Use Address:	
Name of Business:	
Hours of Operation:	
Description of Temporary Use:	
Indicate any activities which may tend to cause any noise, vibration, smoke, dust, odors, heat or glare:	
Existing Use of Property:	
State the number and location of parking spaces which you propose for customers and clients:	
State the dimensions and location of any signs proposed:	

## DOOR TO DOOR APPLICANTS ONLY

Applicant		
Name:		Phone:
Date of Birth:	SSN:	Drivers License #:
Address:		
Applicant		
Name:		Phone:
Date of Birth:	SSN:	Drivers License #:
Address:		
Applicant		
Name:		Phone:
Date of Birth:	SSN:	Drivers License #:
Address:		
Applicant		
Name:		Phone:
Date of Birth:	SSN:	Drivers License #:
Address:		

I hereby state that I am the applicant listed above and certify that all information contained above and in exhibits attached hereto is true and correct to the best of my knowledge and belief and is submitted for consideration by the City of Snoqualmie, pursuant to the provision of the Snoqualmie Municipal Code. It is understood that the processing of this application may require additional supporting evidence, data, or statements.

Right of Entry: By signing this application the applicant grants unto the City and its agents the right to enter upon the premises for purpose of conducting all necessary inspection to determine compliance with applicable laws, codes and regulations. This right of entry shall continue until a certificate of occupancy is issued for the property

By my signature, I certify that I have reviewed all submittals for completeness and accuracy.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_