



City of Tracy
333 Civic Center Plaza
Tracy, CA 95376

COMMUNITY & ECONOMIC
DEVELOPMENT DEPARTMENT
MAIN 209.831.6400
FAX 209.831.6439
www.cityoftracy.org

TEMPORARY USE PERMIT APPLICATION

_____	_____	_____
Applicant Name	Business Name	Applicant Telephone
_____	_____	_____
Applicant Address	City, State, Zip	Applicant Email Address
_____	_____	
Location of Activity (Address)	Date and Time of Activity	

Description of Activity		

STATEMENT OF OWNERSHIP OR AUTHORIZATION OF AGENT (Check one item)

I, the undersigned, am the legal owner (or one of the legal owners) of the land listed as the Location of Activity in this application. I hereby authorize and empower _____ (agent) to act on my behalf on all matters relating to this application.

_____	_____	_____
Owner Name	Owner Signature	Date
_____	_____	_____
Owner Address	City, State, Zip	Telephone

SUBMITTAL REQUIREMENTS:

1. Application form completed, signed, and dated.
2. Application fee.
3. Dimensioned Site Plan indicating all activities, locations, buildings, equipment, materials, temporary structures including canopies/ tents, fences, stages, portable toilets, generators, driveways, and drive aisles.
4. For larger events, an event description that includes all activities, dates and times of set up/take down, possible number of people per day, security measures (if any), and any other relevant information.
5. Provide proof of non-profit status if applicable and must be current and in good standing to receive non-profit rate.

ADDITIONAL REQUIREMENTS:

- City business license. For questions or to apply, call (209) 826-1827 or visit <https://Tracy.HdlGov.com>.
- Applicant must comply with all requirements of the South San Joaquin County Fire Authority.
- Applicant must comply with all Building Division requirements.
- If food will be served, a temporary food permit from the San Joaquin County Environmental Health Department may be required. Contact the Department at (209) 468-3438 or icarruesco@sjgov.org for additional information.

In making this application I, the undersigned, understand and agree to the above requirements and certify that all information provided herein is true and correct.

_____	_____
Applicant Signature	Date