

	<h2 style="margin: 0;">Temporary Land Use Change in Occupancy Application</h2> <p style="margin: 5px 0;">Building Inspection Department 160 S. Macy Street, Fond du Lac, WI 54935 Phone (920) 322-3570 fdlinspections@fdl.wi.gov</p>	<p>Address of Project:</p> <hr/> <p>Lot #/Subdivision:</p>
Applicant Information:		
Name:		Email:
Address:		
Day Phone:	Evening Phone:	Fax:
Business Name (if applicable):		Business Address:
Property Owner:		Phone Number:
Project Information Details: (Check and/or Complete All That Apply)		
<input type="checkbox"/> Temporary Land Use – Outdoor Temporary Sales and/or Displays; Circus or Carnival (Provide Site Plan Showing Location and Signage)		
<input type="checkbox"/> Change in Occupancy – New Change in Building or Land Use (Change of Use Classification)		
Description of Previous Land or Occupancy Use: _____ _____ _____ _____		
Description of Proposed Temporary Land or New Occupancy Use: _____ _____ _____ _____		
Date(s)/Time(s) of Proposed Activity:		
If Occupancy is Changing — New Proposed Occupancy Classification:		
Will Any Temporary Structure(s) Be Used? <input type="checkbox"/> Yes, please specify: <input type="checkbox"/> 0-1,000 sq. ft. <input type="checkbox"/> 1,001-3,000 sq. ft. <input type="checkbox"/> 1,001-3,000 sq. ft. <input type="checkbox"/> Greater than 3,001 sq. ft. <input type="checkbox"/> No		
Will Any Scanners or Scales Be Used? <input type="checkbox"/> Yes, Scanner(s) <input type="checkbox"/> Yes, Scale(s) – Number: _____ <input type="checkbox"/> No		
Applicant Signature agrees to the terms of this Permit Application: (Sign Below)		
<p>The applicant agrees to comply with the Wisconsin Enrolled Commercial Building Code, and all other applicable codes and municipal ordinances and with the conditions of this permit. The applicant understands that the issuance of the permit creates no legal liability, express or implied, on the department or municipality: and certifies that the information is accurate. The applicant agrees to allow the building inspection and assessing staff to access to the property for the inspection of this permit.</p>		
Primary Applicant: <input type="checkbox"/> Property Owner <input type="checkbox"/> Renter <input type="checkbox"/> Other:		
Primary Applicant Name(Print): _____		Phone: _____
Primary Applicant Signature: _____		Date: _____