



## Town of Meredith Special Permit

### OFFICE USE ONLY

Date Submitted: \_\_\_\_\_

Complete App: \_\_\_\_\_

Narrative: \_\_\_\_\_

Sketch: \_\_\_\_\_

Fee Due: \$ \_\_\_\_\_

Special Permits for temporary uses are provided for in Article III, Section Q of the Zoning Ordinance. There are two classifications of a Special Permit, please check which applies to your event/activity:

- ☐ Temporary unapproved use or activity with *a maximum duration of two weeks.*
- ☐ Temporary, unapproved use or activity (permitted or allowed by Special Exception in the applicable Zoning District) lasting *longer than two weeks but no more than six months.*

Location/Street Address: \_\_\_\_\_ Zoning District: \_\_\_\_\_ Map \_\_\_\_\_ Lot \_\_\_\_\_

Property Owner: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Applicant: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Event/Activity (temporary use): \_\_\_\_\_

Dates & duration of temporary use: \_\_\_\_\_ # of Vendors: \_\_\_\_\_

Hours of operation for the temp. use: \_\_\_\_\_ Hours of operation for existing onsite business: \_\_\_\_\_

The applicant is responsible for contacting his/her abutters. Have you shared your event/activity details with your neighbors? Y/N (circle one)

If yes, do they have any concerns, and how have those concerns been addressed? Please describe below.

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- \* A narrative of the temporary use along with a sketch of the activity layout on the property is required. Please attach.
- \* Complete the checklist below, if the item is applicable to your event/activity, please provide a complete description in the narrative.

	Applicable	Not Applicable
On-site Parking/Vehicle Circulation		
Off-site Parking		
Private security		
Use of Public Right of Ways (town or state). Evidence of insurance required.		
Entertainment/Music/Band(s)		
Food Service/ cooking equipment		
Alcohol Sales and/or consumption		
Trash/waste method of storage		
Bathroom facilities		
Source of Electrical service		
Propane		

*In submission and acceptance of this permit, the owner and/or applicant acknowledges their obligation to abide by any conditions of the special permit. The property owner hereby acknowledges that they are responsible for the safe and orderly operation and management of the temporary use or uses, and compliance with any and all conditions of the approved Special permit.*

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**Owner's Signature & Date**

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**Applicant's Signature & Date**



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### Departmental Review & Recommendations

Provide Comments below or attach

Department	Comments	Signature & Date
Police Department		
Fire Department		
Public Works		
Water & Sewer Department		
Town Planner		
Health Officer		
Zoning Administrator		
Code Enforcement Officer		

\_\_\_\_\_  
Approved by Town Manager

\_\_\_\_\_  
Date