



Community & Economic Development Dept.
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**TEMPORARY
 USE PERMIT
 COMPANION PAGE**

OPERATION STATEMENT

Describe the Proposed Temporary Use (Off-Site Construction Site, Special Event, Temporary Structure, etc.):

Months of Operation: _____

Days of Operation: _____ Hour of Operation: _____

of Employees: _____ Max # of Attendees: _____

Will there be food vendors? Yes No

Will there be alcohol sold? Yes No

Describe any structures on-site (generators, stages, tents, etc.): _____

Describe any temporary parking (parking on dirt lot, grass, or other area not normally used for parking):

Describe method of waste disposal and frequency: _____

Describe security measures (security guards, cameras, how many, etc.): _____

STAFF USE ONLY

Project #: _____

Applicant: _____