



Village of Sand Lake

2 E. Maple St., PO Box 139
Sand Lake, MI 49343

Application for Temporary Use Permit

Submission Date: _____

Property Owner: _____

Mailing Address: _____

Phone Number: (Cell) _____ (Other) _____

Email address: _____

Owner's Signature: _____

Applicant Name (if different than owner): _____

Mailing Address: _____

Phone number: (Cell) _____ (Other) _____

Email Address: _____

Applicants Signature (if not owner): _____

Please attach a copy of a site plan for the property and describe the nature and dates of the activity to be conducted.

Do you plan to use any portion of a village street or sidewalk?

Yes _____

No _____

Will you event have amplified sound associated with it?

Yes _____

No _____

Do you require additional public safety?

Yes _____

No _____

Will there be a public gathering of greater than 49 people?

Yes _____

No _____

Approved _____

Denied/Reason: _____

Approval Signature: _____

Date: _____ Application Fee Pd? _____