

PLANNING AND ZONING DEPARTMENT Temporary Use Certificate

The undersigned applies for a Zoning Certificate for the following use. Said certificate to be issued on the basis of the information contained within this application. If you are not the property owner(s), please include a signed letter from the property owner(s) authorizing you to make this application. The applicant hereby certifies that all information and attachments to this application are complete and accurate, and that the proposed use will be in compliance with the temporary use standards outlined in Section 4.10 of the Deerfield Township Zoning Resolution.

Please include address, stree	t, city, and zip code		
Subdivision	Lot #	Parcel ID #	
CONTACT INFORMA	TION		
]	PROPERTY OWNER	OCCUPANT	
Name			
Company			
Address			
City, State, Zip			
Phone			
Fax			
Email			
DESCRIPTION Explain Use in Detail (please	include square footage and intended t	use)	

PLEASE REVIEW SECTION 4.10 TEMPORARY USES AND STRUCTURES STANDARDS OF THE TOWNSHIP ZONING RESOLUTION.