

*Town of Lake Pleasant
Special Use Permit*

This Special Use Permit must be displayed at Premises
Application # _____:

Applicant's Name: _____

Applicant's Address: _____

Contact Person: _____

Telephone: _____ (c) _____

Address of Premises for which Special Use Permit is requested:

Date of issuance: _____

This Special Use Permit is issued to the Applicant named above to conduct the activity indicated below.

The conditions, surroundings and arrangements for the activity(ies) and/or use(es) subject to this Special Use Permit shall be in accordance with all applicable laws, ordinances, regulations and the conditions (if any) mentioned below.

The Premises shall be subject to periodic inspection by The Town of Lake Pleasant to ensure compliance with applicable all applicable laws, ordinances, regulations and conditions. The Special Use Permit is subject to regulation or condition.

Special Use: _____