

# Temporary Event Application

## Zoning Permit

Planning and Development Department • One Exchange Plaza, Suite 400 | Raleigh, NC 27601 | 919-996-2492



This form is required when seeking approval of a Temporary Event as referenced in Unified Development Ordinance (UDO) Section 6.8.2.A.

<b>Office Use Only:</b> Case #: _____	Planner (print): _____
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<b>TEMPORARY EVENT</b>
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All temporary events lasting more than 1 day on any premise in any one calendar year shall complete this application and meet the specified criteria as provided in Unified Development Ordinance (UDO) Section 6.8.2.A.
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<b>APPLICANT INFORMATION</b>
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Business/Corporation/LLC:	Date:
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Shopping Center/ Development:
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Address and Suite #:
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Describe the temporary event activity:
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Event Dates:
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<b>Note:</b> No premise shall be the site of a temporary event exceeding a collective total of 20 days, or 3 individual weekends, or both within any one calendar year. In this context, a weekend shall constitute 3 consecutive days.
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<b>Property Owner Name (if different from Applicant/Registrant):</b>
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Phone #:	E-mail:
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Mailing Address:
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<b>Applicant Name:</b>
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Phone #:	E-mail:
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Mailing Address:
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Proposed Temporary Event Information (To be acknowledged or provided by Applicant)	To Be Completed by City Staff		
Provide the following:	YES	NO	N/A
Provide a graphic of the property with the location of the event clearly marked and labeled. (Note: If needed, <a href="#">lmaps</a> can be used to obtain graphic.)			
Provide attestation that property owner is aware of and consents to the requested temporary event.			
The following UDO standards apply to Temporary Events:	To Be Completed by Applicant		
	Affirmed	N/A	
No premise shall be the site of a temporary event exceeding a collective total of 20 days, or 3 individual weekends, or both within any one calendar year. In this context, a weekend shall constitute 3 consecutive days.			
Signs associated with a permitted temporary event shall be a maximum size of 64 square feet in area allocated to no more than 5 signs.			
All outdoor activities shall be discontinued by 11 PM when located closer than 500 feet to a residential use or a congregate care facility.			
No unauthorized encroachments on public rights-of-way are allowed.			
The temporary event must comply with all applicable floodplain policies.			

SIGNATURE BLOCK	
The undersigned agrees that the proposed Temporary Event will be maintained in all respects in accordance with the information submitted herewith, and in accordance with the provisions and regulations of the City of Raleigh Unified Development Ordinance.	
I/we have read, acknowledge, and affirm that this project is conforming to all application requirements applicable with the proposed development use. I acknowledge that this application is subject to the filing calendar and submittal policy, which states applications will expire after 180 days of inactivity.	
Signature:	Date:
Printed Name:	

# Temporary Event Attestation

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## Temporary Event Attestation Statement

I, the undersigned, do hereby attest that the legal owners of the property located at:  
(Address) \_\_\_\_\_ have provided authorization for a Temporary  
Event to occur on (Dates) \_\_\_\_\_ at the above referenced property. I do  
hereby further attest that the temporary event will operate in accordance with City of Raleigh Unified  
Development Ordinance (UDO). I understand that any falsification, omission, or concealment of material  
fact may be a violation of the UDO subjecting myself and the property owner to administrative, civil,  
and/or criminal liability.

Owner/Representative Name (Print)	Mailing Address (Include name of organization)	E-mail Address

Signature: \_\_\_\_\_

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

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_