



## INSTRUCTIONS FOR REQUESTING A TEMPORARY OUTDOOR SALES EVENT PRE-APPLICATION MEETING

### Pre-Application Submittal and Review Process:

- A. **Complete a Pre-Application Information Form** that contains a detailed description of the request.
- B. **Submit a PDF copy of Concept Plans** that convey the proposed project, indicating the boundary of the site, parking, and location of associated activities and/or structures.
- C. **Submit the Pre-Application Information Form and Concept Plans** to the Development Department in person or via email to [chambleedevelopment@chambleega.gov](mailto:chambleedevelopment@chambleega.gov). The application and forms will be reviewed within (2) two business days.
- D. **Attend a Pre-Application Meeting** with the Development Department. The Development Department will contact the applicant to schedule a Pre-Application Meeting. Feedback about the proposal along with an overview of the application/review process will be provided during this meeting. The applicant should bring a hard copy of the drawings to the meeting.
- E. **Submit a Signed Copy of the Pre-Application Information Form** with the formal application. When the applicant is prepared to submit the full, complete application for the development activity or zoning process a copy of this form is required to be submitted.

### PRE-APPLICATION INFORMATION FORM SUBMITTAL CHECKLIST:

- Complete Pre-Application Information Form
- One PDF copy of Concept Plans



# TEMPORARY OUTDOOR SALES EVENT PRE-APPLICATION INFORMATION FORM

*This page must be completed by the Applicant.*

## APPLICANT

Name \_\_\_\_\_

Business \_\_\_\_\_

Mailing Address \_\_\_\_\_

Suite/Apt. # \_\_\_\_\_

City, State \_\_\_\_\_

Zip Code \_\_\_\_\_

Primary Phone # \_\_\_\_\_

Alternate Phone # \_\_\_\_\_

E-mail \_\_\_\_\_

## EVENT SUMMARY

Address of Event \_\_\_\_\_

Name of Event \_\_\_\_\_

**Detailed Description** (*Include information about activities, structures, vendors, hours and dates*):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant Signature \_\_\_\_\_

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

**NOTE:** This form must be signed by the Development Department and submitted with your application.

*For Internal Use Only:*

Pre-Application Meeting Date: \_\_\_\_\_

Staff Printed Name: \_\_\_\_\_ Signed: \_\_\_\_\_