

Chief Executive Officer  
Michael Thurmond

**DEPARTMENT OF PLANNING & SUSTAINABILITY**

Director  
Andrew A. Baker, AICP

**Special Administrative Permit (SAP)**

**TEMPORARY BUILDING**

Address of Subject Property: \_\_\_\_\_

(If no address): District: \_\_\_\_\_ Land Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Parcel: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Daytime Telephone No.: \_\_\_\_\_ E-mail: \_\_\_\_\_

Permit Duration: (From) \_\_\_\_/\_\_\_\_/\_\_\_\_ (To) \_\_\_\_/\_\_\_\_/\_\_\_\_ Total # Days: \_\_\_\_  
(From) \_\_\_\_/\_\_\_\_/\_\_\_\_ (To) \_\_\_\_/\_\_\_\_/\_\_\_\_ Total # Days: \_\_\_\_  
(From) \_\_\_\_/\_\_\_\_/\_\_\_\_ (To) \_\_\_\_/\_\_\_\_/\_\_\_\_ Total # Days: \_\_\_\_

Type of Temporary Building:

- Caretaker's residence in an industrial district.
- Sales office for a subdivision currently under development.
- Temporary building used in conjunction with construction work or pending completion of a permanent building for a period concurrent with an approved land disturbance and building permit.

I, \_\_\_\_\_ agree to abide by the requirements of Art.4.3.7 of the code.

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

**SECTION BELOW TO BE COMPLETED BY OFFICE**

Zoning Classification: \_\_\_\_\_

*The proposed temporary building is allowed as per Section 27. 4.3.7* \_\_\_\_\_.

Permit Duration: (From) \_\_\_\_/\_\_\_\_/\_\_\_\_ (To) \_\_\_\_/\_\_\_\_/\_\_\_\_ Total # Days: \_\_\_\_  
(From) \_\_\_\_/\_\_\_\_/\_\_\_\_ (To) \_\_\_\_/\_\_\_\_/\_\_\_\_ Total # Days: \_\_\_\_

\_\_\_\_\_  
Staff Signature Date

DEPARTMENT OF PLANNING & SUSTAINABILITY

AUTHORIZATION

The property owner should complete this form or a similar signed and notarized form if the individual who will file the application with the County is not the property owner.

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

TO WHOM IT MAY CONCERN:

(I), (WE), \_\_\_\_\_  
Name of Owner(s)

being (owner) (owners) of the subject property described below or attached hereby delegate authority to

\_\_\_\_\_  
Name of Applicant or Representative

to file an application on (my), (our) behalf.

\_\_\_\_\_  
Notary Public Owner

\_\_\_\_\_  
Notary Public Owner

\_\_\_\_\_  
Notary Public Owner

\_\_\_\_\_  
Notary Public Owner