



TEMPORARY BUSINESS LICENSE REQUIREMENTS

TEMPORARY BUSINESS LICENSE ICE CREAM TRUCKS

- » Must apply every year as if a new business. A completed application is required.
- » The permit is valid from April 1st through October 31st.
- » Proof of the registered name of your business with the Department of Commerce.
- » Proof of permanent Sales Tax number. Temporary will not be accepted.
- » Copy of valid Utah drivers license for every driver.
- » Proof of commercial insurance for the Ice Cream vehicle
- » Color picture of the Ice Cream vehicle, along with vehicle registration.
- » Fee is \$318 and payable at the time you turn in your Business License application and documentation.

SHAVED ICE STAND REQUIREMENTS

- » Must apply every year as if a new business. A completed application is required.
- » This permit is valid from April 1st through October 31st
- » A completed Industrial Water Pretreatment questionnaire (included in package)
- » A completed Food Service Establishment questionnaire (included in package)
- » Copy of owners picture Government issued ID.
- » Proof of the registered name of your business with the Department of Commerce.
- » Proof of permanent Sales Tax number. Temporary will not be accepted.
- » Temporary Use Permit (needs to be signed by a representative at Community Development)
 1. Site plan.
 2. Written agreement from the property owner.
- » Copy of Health Department certificate or permit. Contact the Health Department at 801-851-7000.
- » Fee totals \$618
 - \$218 for Business License
 - \$100 for Temporary Use Permit
 - \$300 for Clean-up Bond (bond is refundable) A request must be submitted in writing.

PO Box 1849
351 W Center St.
Provo, UT 84601
Phone 801 852 6000



Office use only
License # _____
Date _____
Payment _____
CSR initials _____

TEMPORARY BUSINESS LICENSE APPLICATION

Business Name: _____

Business Mailing Address: _____ City _____

State: _____ Zip Code _____ Business Phone: () _____

Owner Name _____ Owner Address _____

Apt/Suite No _____ City _____ State _____ Zip Code _____

Telephone () _____ Email Address _____

Temporary Tax Number (mandatory) _____ Federal ID No _____

Business Entity No _____ Emergency Contact _____

Telephone () _____

Location of Event _____ Inside Event Outside Event

Proposed Start Date _____ Proposed End Date _____

Detailed Description of Event

Check all that apply

Christmas Tree Sales
Produce stand

Fireworks stand
Farmers Market

Shaved ice stand
Carnival/Circus
Other _____

I/We have read the following and agree to conduct business strictly in accordance with all ordinances, codes and regulations set forth by Provo City Corporation, Utah County, the State of Utah, and Federal standards, whichever applies. I/We also agree that no other type of business will be conducted other than what has been stated above.

I/We attest that all information on this application is true and correct.

Applicants Signature

Please print your name



TEMPORARY USE PERMIT APPLICATION

Please fill out this box before leaving our office to make sure the Zone allows this use.

Name of Business _____

Address of Property _____

Description of Temporary Business _____

Dates of Operation: Start Date _____ End Date _____

(30 day maximum. Exceptions: shaved ice stands are permitted from April 1st to October 31st; farmer's markets are permitted from May 1st to October 31st; and Christmas tree sales are permitted from one (1) day prior to Thanksgiving Day to December 25th)

TUP Business Owner's Name _____ Phone _____

TUP Business Owner's Mailing Address _____

Alternate Contact _____ Alternate Contact _____

Applicant's Signature _____

Business Name of Host Property _____

Zone _____ (Allowed zones: PF, PIC, SC1, SC2, SC3, DT1, DT2, GW, FC, ITOD, CG, CM, M1, and M2)

Zone verified by _____ (Zoning Signature).

Temporary Business License Fees: (Paid at Provo Business License office)

- The applicant must provide a cash bond to ensure that the site will be cleaned up and restored to its original condition.
 - » \$1,000 bond for circus, carnival, or related uses.
 - » \$300 bond for other temporary uses.
- Temporary Use Permit Fee: \$100.
- Business License Application Fee: \$218.
- Firework stand fees: Permit fee: \$200, Application Fee: \$134, and Inspection Fee: \$50.

TUP Casefile #: (Community Development office) _____

Written Agreement with Host Property Owner:

- A written agreement with the owner of the parcel upon which your vender will be located, must be attached to this application. This agreement must include the parking agreement, responsibility for maintenance, sanitary facilities agreement, and the party responsible for clean up once the temporary use is closed.

Site Plan:

Please include the following checklist items in a Site Plan (drawn to scale) which should be drawn on Page 3 (Exhibit 1) of this application:

- Show the layout of the proposed temporary use. The use must be compatible with access, circulation, parking, and other significant elements of existing uses and structures on the site.
- Show the parking location and number of spaces.
(Note: the minimum required parking is two (2) spaces, but more parking will be required if the need exceeds two (2). These spaces must not decrease the parking required for the hosting property's current use. Parking must also meet parking standards per title 14.37, except that parking may be provided on gravel rather than concrete or asphalt surfaces.)
- Show where your designated vehicle access will be.
- Show where bathroom or sanitary facilities will be located. (Must be located 300 feet or less from the temporary use, and on the same lot.)
- Farmer's Markets must also identify the number and type of vendors, and provide a signage plan for the proposed uses.

Inspections:

- A building permit (\$100) and an inspection are required. Visit Community Development or call 801 852 6400 to apply for the building permit and to schedule the inspection of the structure. All structures must be securely anchored to the ground at not less than four (4) points, and meet the approval of City Building Inspectors.

Building Inspector signature: _____ Date: _____.

- If temporary power is needed, call the Energy Dept. at 801 852 6852.
 - Temporary power fee: Min. of \$200. (Fee paid at Community Development).
- A County Health Inspection is required when food is sold. Call 801 851 7525 to arrange an inspection. Additional fees apply.

After all items on this application are completed, return application to the Zoning Division for license approval.

(Zoning/Planning Signature) _____

Bond release: Temporary structures must be removed and the site restored to its original condition within 15 days of closure of the business. Please remember to schedule a final inspection for your bond release at least one day in advance. Call the Licensing Department at 801 852 6532 to request an inspection.

SCALED DRAWING EXHIBIT 1

(TEMPORARY USE PROPOSAL)



INDUSTRIAL WASTEWATER PRETREATMENT QUESTIONNAIRE

Business Name _____ phone _____

Business Address _____

Mailing Address _____

SIGNING OFFICER'S INFORMATION (COMPANY OWNER OR OFFICER)

Type or Print Name _____

Type or Print Title _____

Phone _____ Standard Industrial Classification Code (SIC#): _____

Briefly describe manufacturing or service activities _____

List types of chemicals used (include all cleaning solvents, soaps, etc.) _____

Type of discharge: Batch Continuous If Batch, average in 24 hours _____

Are there scheduled shut downs? Yes No If Yes, when _____

Raw Water Sources: Private Wells _____ Gpd(gallons per day)

Provo Culinary _____ Gpd

Other (specify) _____ Gpd

RESPONSIBLE PARTY'S CONTACT INFORMATION (COMPANY OWNER OR OFFICER)

Type or Print Name _____

Type or Print Title _____

Phone _____

NOTE: Material Safety Data Sheets (MSDS) shall be filed with the City before business operations begin.

List principal raw materials used _____

List the principal products or services of the business _____

Is production seasonal? Yes No If Yes, explain _____

Describe water treatment processes in use or proposed _____

Water Consumption in facility in Gpd. Cooling _____ Boiler Feed _____ Process _____
Sanitary _____ In Product _____ Other _____

Average Volume in Gpd of Discharge of water loss to _____ City Sewer _____ Evaporation _____

Natural Outlet _____ Waste Haulers _____ In Product _____ Other _____

Is Discharge to Provo City Sewer System: Yes No

If Yes is discharge: Intermittent Steady

Is there a spill prevention counter-measure plan in effect for this facility? Yes No

If Yes, please attach a copy.

I am familiar with the information contained in this questionnaire and swear that the information is true, complete and accurate. If any of the answers to questions contained in this questionnaire change, the business will notify the City of Provo of the proposed change(s). Notification does not constitute approval of the proposed change(s).

Industrial Pretreatment

1685 S East Bay Blvd.

Phone: 801 852 6793

Signature of Authorized Representative _____ Date _____



INDUSTRIAL PRETREATMENT PROGRAM FOOD SERVICE ESTABLISHMENT QUESTIONNAIRE

BUSINESS INFORMATION

Company Name _____
Address _____ Apt/Suite No. _____
City _____ State _____ Zip Code _____
Phone Number _____ Fax _____
Contact Person _____

Please describe your food preparation and clean up activities (check all that apply):

1. Baking Grilling Frying Vegetable prep Other (please describe):

2. Approximately how many customers do you serve per average day? _____
(this information is kept confidential)

3. Kitchen fixtures used in your establishment: (please indicate amount of each item)

3-compartment sink Bar sink Hand sink Mop sink
 Dishwasher Garbage disposal Floor drains

4. How are the following food by-products disposed of? (check all that apply)

	Sewer	Trash	Recycle
A. Solid Wastes:	_____	_____	_____
B. Oil & Grease:	_____	_____	_____
C. Liquid Wastes:	_____	_____	_____

5. Do you have a grease interceptor or trap? YES NO

**A grease interceptor is a large underground device designed to remove fat, oil, and grease from your kitchen wastewater. A grease trap is a small, similar device that is located under the sink. These are both different from your grease recycling bin.

If "NO," please sign, date, and return the questionnaire.

If "YES," please complete the questionnaire, sign, date, and return it.

6. What size (gallons) is the interceptor? _____

7. Is the interceptor functioning properly? YES NO

If "NO," please explain:

8. How often is the interceptor serviced? _____

9. When was the interceptor last serviced? _____

10. What is the average volume of waste which is removed from the interceptor when it is serviced? _____

11. What is the name and address of the business that services the interceptor?

12. Are service receipts available? YES NO

13. Which of the following kitchen fixtures are connected to your grease interceptor?
(please indicate amount of those that apply)

- | | | | |
|---|---|---------------------------------------|-----------------------------------|
| <input type="checkbox"/> 3-compartment sink | <input type="checkbox"/> Bar sink | <input type="checkbox"/> Hand sink | <input type="checkbox"/> Mop sink |
| <input type="checkbox"/> Dishwasher | <input type="checkbox"/> Garbage disposal | <input type="checkbox"/> Floor drains | |

Additional comments:

The information in this questionnaire is familiar to me and, to the best of my knowledge and belief is true, complete, and accurate.

(Name and title of signing official)

(Date)