**Approved Date** 



## Rio Arriba County Planning & Zoning Department

## **Temporary Use Permit Application**

Permit #:	Parcel #:	Community:	
Applicant Name:			<del> </del>
Mailing Address:			
		Email:	
Property Owner Name:			
Phone: () C	Cell: ()	Email:	
<b>Event Information</b>			
Name of Special Event:		·····	
Event Dates Begin:		Event Date End:	
Location of Event:			
Operation Start Time:		Operation End Time:	
Road Ways and Easements Effected: YES NO If yes please provide roadway name below			
Name of Roadway: County Road: NM State Hwy: Private Drive:			
Traffic Control Clearance Rec	quired: YES	NO DOT:	
Security: YES	NO Provided by:		
Will Alcohol be Served:		Food Provided at Event: YES	NO
Number of Parking Spaces Pro	ovided:	Lighting provided: YES	NO
Accommodation for Sanitary Facilities & Water Supply Needed: YES NO Provided by:			
A COMPLETE COUNTY APPLICATION OF THE EVENT MUST BE SUBMITTED TO RIO ARRIBA COUNTY			
PLANNING AND ZONING DEPARTMENT TWO (2) WEEKS PRIOR TO THE SCHEDULED EVENT.			
Applicant's Signature:		Date:	
County Fire Marshal Approval Signature:			
Rio Arriba County Sherriff Approval Signature:			

## Applicant Must Provide the Following: Planning & Zoning Staff will check off on the submitted items below. \_\_\_\_\_ Notarized Letter of Approval from Property Owner (if you are the property owner, provide the warranty deed) \_\_\_\_\_ Site Plan (include building event will be held at, show parking spaces, ingress & egress etc.) \_\_\_\_\_ Proof of Paid Taxes \_\_\_\_\_ NMED Permit (if food will be being served) \_\_\_\_\_ ABC Dispensers Permit (if alcohol will be served) \_\_\_\_\_ Proof of Security for Event \_\_\_\_\_ Business Licenses for Rio Arriba County for any vendors \_\_\_\_\_ Certificate of Liability Insurance (Proof of insurance or bond must be provided for the specific event. Insurance must show Rio Arriba County as additional insured. Commercial general liability, each occurrence of \$1,000,000.00.) Planning & Zoning Approval: Date:

For Official Use ONLY: