

**CITY OF ST. MATTHEWS**  
3940 GRANDVIEW AVENUE ST. MATTHEWS, KY 40207  
(502) 895-9444

**APPLICATION FOR TENT PERMIT**

Applicant (PLEASE PRINT) \_\_\_\_\_

DATE: \_\_\_\_\_

Contractor

Owner

Address: \_\_\_\_\_

Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Location of Tent: \_\_\_\_\_

N  S  E  W  Side of \_\_\_\_\_ # of Feet: \_\_\_\_\_

From the Intersection of: \_\_\_\_\_

Description of Tent:

\_\_\_\_\_

Width: \_\_\_\_\_ Height: \_\_\_\_\_ Depth: \_\_\_\_\_ Cubic Feet: \_\_\_\_\_

Size of Lot – Width: \_\_\_\_\_ Depth: \_\_\_\_\_ Total Area: \_\_\_\_\_ Sq. Ft.: \_\_\_\_\_

**\*DISTANCE LINES – FROM PROPERTY LINE TO TENT**

Front: \_\_\_\_\_ Side: \_\_\_\_\_ Side: \_\_\_\_\_ Rear: \_\_\_\_\_

**Use of Proposed Tent:**

DATES OF TENT: \_\_\_\_\_

(Describe): \_\_\_\_\_

Present Use of Buildings or Structures and/or Lot:

\_\_\_\_\_

A plan must be submitted with this application showing the size and location of the Lot, the dimensions and locations of the proposed tent on the lot and the dimensions and location of the existing building or structures on the lot.

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Telephone Number)

**APPROVAL:** \_\_\_\_\_

(CODE ENFORCEMENT OFFICER)

\_\_\_\_\_

(DATE)