



## City of Chilliwack – Temporary Use Permit

Civic address of properties to which this TUP will be applicable to:

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<b>Purpose of TUP:</b> <i>(attach letter if more space is required)</i>

<b>Details:</b>	
<i>Please check all applicable details</i>	
<input type="checkbox"/> Site Profile	Qty:
<input type="checkbox"/> TUP FEE	

Is a building permit required subsequent to the issuance of this TUP?

Yes *(Application should be submitted at the same time as TUP application)*       No

<b>Owner:</b> <i>(If owner is not able to sign application, please provide a letter of authorization)</i>			
Name:		Signature:	
Address:			Postal Code:
Email:	Phone:	Cell:	Fax:

<b>Applicant:</b>			
Name:		Contact:	
Address:			Postal Code:
Email:	Phone:	Cell:	Fax:

*I/We have attached to this application the attachments required and hereby agree to submit further information deemed necessary for processing this application.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

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