

# Pender County Planning and Community Development

**Planning Division**  
805 S. Walker Street  
PO Box 1519  
Burgaw, NC 28425



Phone: 910-259-1202  
Fax: 910-259-1295  
[www.pendercountync.gov](http://www.pendercountync.gov)

## TEMPORARY EVENT PERMIT

### Activities Requiring a Temporary Event Permit

The Administrator or their agent may issue a temporary permit for carnivals, religious revivals, sport events, circuses, festivals and similar activities that will last for a period of up to sixty (60) days in the districts in which they are indicated as a permitted use. All temporary events shall submit an application and site plan, at least 14 calendar days prior to the event, with a description of activities so that it can be determined if adequate parking, sanitation & other necessary facilities will be available. The Administrator shall submit each temporary event proposal to the Building Inspector, Health Director, and Fire Marshal for review and approval.

| TABLE OF PERMITTED USES  |                   |                  |             |    |    |    |           |            |    |            |                 |    |
|--|-------------------|------------------|-------------|----|----|----|-----------|------------|----|------------|-----------------|----|
| P=Permitted Use D=Permitted w/ Use Standards S=Special Use Approval Required SD=Special Use Approval Required w/ Additional Standards PM=Permitted in conjunction w/ the MDP process |                   |                  |             |    |    |    |           |            |    |            |                 |    |
| Use Category   | Specific Use Type | Zoning Districts |             |    |    |    |           |            |    |            |                 |    |
|  |                   | Ref NAICS        | RA          | RP | RM | MH | PD        | GB         | OI | IT         | GI              | EC |
|  |                   |                  | Residential |    |    |    | Mixed Use | Commercial |    | Industrial | Special Purpose |    |
| <b>MISCELLANEOUS USES</b>  |                   |                  |             |    |    |    |           |            |    |            |                 |    |
| <b>Temporary Events</b>  |                   |                  | D           |    |    |    |           | D          | D  | D          | D               |    |

# TEMPORARY EVENT PERMIT APPLICATION

## THIS SECTION FOR OFFICE USE

|                 |            |      |  |
|-----------------|------------|------|--|
| Application No. | <b>TEP</b> | Date |  |
|-----------------|------------|------|--|

### SECTION 1: APPLICANT INFORMATION

|  |  |                    |  |
|--|--|--------------------|--|
| Applicant's Name:                              |  | Owner's Name:      |  |
| Applicant's Address:                           |  | Owner's Address:   |  |
| City, State, & Zip                             |  | City, State, & Zip |  |
| Phone Number:                                  |  | Phone Number:      |  |
| Legal relationship of applicant to land owner: |  |                    |  |

### SECTION 2: EVENT INFORMATION

|                                       |  |                        |  |
|---------------------------------------|--|------------------------|--|
| Name of Event:                        |  |                        |  |
| Organization's Name and Address:      |  |                        |  |
| Location of Event:                    |  |                        |  |
| Event Dates:                          |  | Event Hours:           |  |
| Property Identification Number (PIN): |  | Zoning Classification: |  |
| Description of Temporary Event:       |  |                        |  |
|                                       |  |                        |  |
|                                       |  |                        |  |
|                                       |  |                        |  |

### SECTION 3: SIGNATURES

|                       |  |       |  |
|-----------------------|--|-------|--|
| Applicant's Signature |  | Date: |  |
| Owner's Signature     |  | Date: |  |

### SECTION 4: CONDITIONS OF PERMIT (STAFF ONLY) *Check all that apply*

|  |   |
|--|---|
|  | Subject to compliance with all local, state and federal regulations     |
|  | Compliance with the site plan and application submitted for this permit |
|  | Pender County Fire Marshal approval                                     |
|  | Pender County Building Inspections approval                             |
|  | Pender County Environmental Health approval                             |

### SECTION 5: ADDITIONAL COMMENTS

|   |  |
|---|--|
|   |  |
| <b>RETURN COMPLETED APPLICATION TO:</b><br>Pender County<br>Planning & Community Development<br>PO Box 1519<br>Burgaw, NC 28425 |  |

|                          |  |       |  |
|--------------------------|--|-------|--|
| Application Approved by: |  | Date: |  |
|--------------------------|--|-------|--|