



**CITY OF COOLIDGE
GROWTH MANAGEMENT
131 W PINKLEY AVE
COOLIDGE, AZ 85228
520-723-6075**

TEMPORARY USE PERMIT

FEE \$110.00

PERMIT NO. _____

NAME: _____

BUSINESS NAME: _____

ACTIVITY ADDRESS: _____

PARCEL NUMBER: _____

TELEPHONE NUMBER: _____

SALES TAX LICENSE NUMBER: _____ CITY: _____

DRIVERS LICENSE NUMBER: _____

DESCRIPTION OF ACTIVITY: _____

LENGTH OF TIME FOR ACTIVITY: _____

The following conditions are to be followed and observed during the above activity. Failure to comply with the conditions will constitute justification to **REVOKE** this permit.

1. _____

2. _____

3. _____

4. _____

5. _____

Signature

Witness