



Township of West Milford
TEMPORARY OUTDOOR COMMERCIAL SALES EVENT
AND FARMERS MARKET PERMIT APPLICATION
(Attach all pertinent plans and documentation)

Fee: \$50.00
 Check #: _____
 Date: _____

Applicant's Name _____ Email _____

Applicant's Mailing Address _____ Phone # _____

Type of Activity _____

Start Date _____ End Date _____ Time: _____

Location Address of Activity _____ Block _____ Lot _____ Zone _____

Name of Contact Person: _____ Phone # _____

Anticipated Number of Persons _____ Amount of Parking Spaces Provided _____ Number of Toilet Facilities Available _____

Check any of the following that apply:

- Township Owned Property _____ BOE Owned Property _____ Insured _____ Non Profit Agency _____
 Food Preparation _____ On-Site Food Vendors _____ Amplified Music _____ Solid Waste Receptacle Provided _____
 On-Site Tents, Structures, Trailers _____ Temporary Signage _____ Medical Facilities Available _____

AFTER ALL DEPARTMENTS HAVE REVIEWED, PLEASE RETURN TO THE BUILDING/ZONING DEPARTMENT FOR ISSUANCE OF A PERMIT. PLEASE NOTE THAT THE BUSINESS ADMINISTRATOR/BOARD SECRETARY MUST APPROVE EVENTS FOR BOE OWNED PROPERTIES.

HEALTH OFFICER CONDITIONS: _____

Signature: _____ **Date:** _____

POLICE CHIEF CONDITIONS: _____

Signature: _____ **Date:** _____

DPW CONDITIONS: _____

Signature: _____ **Date:** _____

ENGINEERING CONDITIONS: _____

Signature: _____ **Date:** _____

COMMUNITY SERVICES & RECREATION DIRECTOR CONDITIONS: _____

Signature: _____ **Date:** _____

FIRE MARSHAL CONDITIONS: _____

Signature: _____ **Date:** _____

TOWNSHIP ADMINISTRATOR CONDITIONS: _____

Signature: _____ **Date:** _____

CONSTRUCTION OFFICIAL CONDITIONS: _____

Signature: _____ **Date:** _____