

Permit Finalled by: _

9605 NE 24th Street • Clyde Hill, WA 98004 425-453-7800 • Fax: 425-462-1936 • www.clydehill.org

Public Place Use Type A / Type B Application

Please read Chapter 12 of the Clyde Hill Municipal Code

Select Permit Type Usage Detail		Application Fee	
☐ Type A	Non-profit use, less than 24 hours		\$0
☐ Type B For-profit use, less than 72 h		! hours	\$250
Phone:		Propos	ed Activity:
mail: Signature	Date		on:s)
		Time(s)):
UBI #: ☐ I have obtained a Clyde Hil ☐ I will report any appropriate Tax Number: 1708	I Business License sales tax to the City of Clyde Hill's e certificate as described in Clyde	det pro are	ave provided a map and/or site plan tailing the area I wish to use during the oposed activity. If applicable, I have marked eas where cones will be placed. fill not need traffic cones for this event. fease deliver traffic cones for this event to:
or Office Use			Accepted by:
Application Fee: \$			Date:
Receipt: #			Date
Date:			Issued by:
use described above accord any approved plans and s	If by the City of Clyde Hill for the public ing to the conditions herein and accor pecifications pertaining thereto, subjec- ordinances of the City of Clyde Hill.	ding to	Date:
Approved by:	Date:		

Date: