



**County of Powhatan,
Virginia**
Temporary Business Permit
Application

For Office Use Only	
Case Number	
Pre-Application Meeting (date)	
Department Approval	

Powhatan County, Virginia
Department of Community Development
3834 Old Buckingham Road: Suite F
Powhatan, VA 23139

Applicant Information		
Name of Applicant		
Name of Business		
Nature of Business		
Dates of Operation*	Start Date	
	End Date	
Mailing Address		
Phone Number		
Email Address		

*Note: Temporary businesses shall not operate for more than 180 days per calendar year [Sec. 83-445(g)(6)].

Owner Information	
(Complete this section if the applicant is not the current property owner)	
Name of Owner	
Mailing Address	
Phone Number	
Email Address	

If the applicant is not the owner, the applicant must provide written documentation that the current property owner consents to the application (see form entitled *Consent of Owner(s) to Permit Request*). If there are multiple owners, all owners must sign the application or provide other documentation consenting to the request.

Revised March 2020

Property Information	
Address	
Tax Map Number	
Current Zoning	
Primary Commercial Use	
Number/Location of Existing Parking Spaces	
Means of Ingress/Egress	
Are there any structures associated with this temporary business?	Yes
	No
	If yes, please provide additional detail:
Is there any signage associated with this temporary business?	Yes
	No
	If yes, please also complete and submit a <i>Temporary Signage Permit Application</i> .

Statement of Validity of Information	
<p>I declare that I have familiarized myself with the rules and regulations pertaining to preparing and filing this application. I further declare that the foregoing statements and answers provided through the various sections of this application are in all respects true and correct to the best of my knowledge and belief.</p>	
Signature of Applicant	
Name of Applicant (Printed)	
<p>Commonwealth of Virginia County of _____, to wit: Sworn and subscribed to before me a Notary Public in and for the jurisdiction aforesaid by _____, whose name is signed to the above, on this _____ day of _____ 20_____.</p>	
Notary Public	Seal
Commission Expires	
Notary Number	

Consent of Owner(s) to Permit Request

If the applicant is not the owner, the applicant must provide written documentation that the current property owner consents to the application.

I, _____, am the owner of the property subject to this request and consent to the request submitted by _____ (Applicant) involving Tax Map _____.

Signature of Owner	
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Name of Owner (Printed)	
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Commonwealth of Virginia
 County of _____, to wit:
 Sworn and subscribed to before me a Notary Public in and for the jurisdiction aforesaid by _____, whose name is signed to the above, on this _____ day of _____ 20_____.

Notary Public		Seal
Commission Expires		
Notary Number		