

Permit No. _____

Date: _____

LYON COUNTY ZONING TEMPORARY USE PERMIT RENEWAL

Name of Owner:	S-T-R:
Mailing Address:	Planning Commission Mtg Date:
EMAIL:	Resolution#
Site address:	Administrative Approval
Phone:	
Legal Description:	

The TUP is (renewed/ renewed in part) and subject to the following conditions:

Permits are issued with the understanding that all work performed be in accordance with the application and in compliance with the Lyon County Zoning Regulations and relevant Laws of the State of Kansas and subject to the conditions stated above.

OFFICE USE ONLY:

Temporary Use Issued Denied:

By: _____ Title: _____ Date: _____

Reason for denial: