



Town of Alpine  
 250 River Circle - PO Box 3070  
 Alpine, WY 83128  
 Phone: 307-654-7757  
[www.alpinewy.org](http://www.alpinewy.org)  
 email: alpine@silverstar.com

Filing Date: 06-05-2024

Permit #MC-05-24

## Temporary Use {Tent} Permit Application

Tent Location Address: 118402 US Hwy 26/89

Subdivision: Broulims Addition Lot #: 6

Project/Business Name: L & K Fireworks

The tent will be used for (Items to be Sold): Fireworks

### See Attached Requirements for Uses

Installation Date:	Removal Date:
June 24, 2024	July 6 <sup>th</sup> . 2024

Tent Dimensions:					
Length	Width	=	Total Square Feet	Sides:	
40	60		2400	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

Are you Leasing/Renting the Property where the ten will be installed?  
 If yes, then provide a copy of the lease/rental agreement.

Yes  No

Please provide your Town of Alpine Business License Number: Business License #313

If you do not have a business license number, please include your business license application with this permit application and the separate filing fee.

Are you using electrical power at the tent location?

Yes  No

Describe the power source location: Battery Backups

Applicant Name: Bryan Brusman		
Physical Address: 118402 US Hwy 26/89	Mailing Address: 1360 N. 35 <sup>th</sup> W.	
City: Alpine	State: ID	Zip: 83402
Email: <a href="mailto:bbrusman@gmail.com">bbrusman@gmail.com</a>	Phone: 208-360-3397	Mobile:
Primary Contact (if not the applicant):	Office Phone:	Email:
Installation Contractor:	Office Phone:	Email:

\*NAME/COMPANY OF PERSON OR BUSINESS PUTTING UP THE TENT

*Contractor Information: {If not the Applicant}		
Mailing Address:		
City:	State:	Zip:
Email:	Phone:	Mobile:

Property Owner Name: Robert Broulim		Email:
Mailing Address: 160S. Clark Street		Office Phone: 208-745-9201
City: Rigby	State: Idaho	Zip: 83442

*I the Applicant of this Permit do hereby understand the following:*

- ❖ This permit will be approved when all reviews have been completed and approved.
- ❖ The Planning & Zoning Commission may issue the permit with specifications and/or conditions.
- ❖ It will be the applicant's responsibility to meet all conditions required for plan review approval.
- ❖ Work cannot commence until the permit is issued by the Planning and Zoning Commission/Administrator and all permit and/or review fees have been paid.

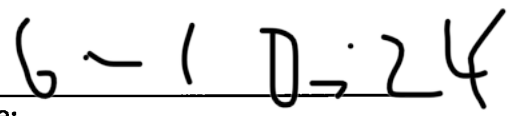
***Authorization/Statement of Verification***

I/We hereby authorize the Town of Alpine, its agents or employees, the right of ingress-egress to and from the property described in this application for any and all purposes necessary to inspect and investigate the provided information, and/or work conducted, under this permit. I/We shall construct/remove structures as specified in the affidavit as stated above. Applicant will adhere to all construction will in accordance with the latest version of the Town of Alpine Land Use and Development Code; along with the most currently adopted version of the International Building Code or the International Residential Code, as adopted by the Town of Alpine.

I/We represent that we have read and understand the terms of this affidavit and the corresponding sections of the latest version of the Town of Alpine Land Use and Development Code.

I/We hereby certify, under penalty of perjury, that all the information provided is true and correct and we have paid the associated permit fees.

  
 \_\_\_\_\_  
 Signature of Applicant/Business Owner

  
 \_\_\_\_\_  
 Date:

**For Office Use Only:**

Review Date:	Reviewed By:
Zoning District:	Identified Use:
Provided Attachments:	Fire Department Review (if needed)