



**MASON COUNTY  
 TEMPORARY LAND USE PERMIT  
 (120 days maximum)**

DATE: \_\_\_\_\_

FEE: \$50

PERMIT#: \_\_\_\_\_

**Applicant Information**

Name	<u>Telephone Number (REQUIRED)</u>		
Mailing Address	City	State	Zip
Date the Trailer/Camper/RV was placed on the property			

**Property where Camper/Trailer/RV is located**

Address/or nearest access road	Township	Section Number
Property Owner Name	Property Owner Address (if different than above)	
Legal Description/Parcel Number (if no address or property not marked)		

**Trailer Description**

Type of Trailer	Year
Color and Trim Detail	Size (dimensions)
Date of Registration (REQUIRED)	License Number (REQUIRED)

I hereby certify that the above temporary use will be in compliance with all provisions of the Mason County Zoning Ordinance and understand that this permit is only valid for a period not to exceed 120 days which commences on the date the camper/trailer was placed on the property. This permit shall be displayed in a window of the trailer such that it is visible from the outside. If the owner of the trailer is different from the owner of the property on which it is located, the property owner will be charged with a zoning violation should the applicant fail to remove the trailer in a timely manner.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

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For Official Use

Temporary Permit: Granted ( ) Denied ( ) Effective: From \_\_\_\_\_ to \_\_\_\_\_

Zoning Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Special Considerations: