

City of Stanley
P.O. Box 53 Stanley, ID 83278
208-774-2286

**Recreational Vehicle
Temporary Special Use Permit Application**

Name: _____ Business Name: _____
Email: _____ Phone #: _____
Address/Location of RV: _____

License plate: _____
VIN#: _____
Description of RV: _____

Reason for placing RV: _____

Requested duration of permit: _____

Are you property owner? Yes / No
If no, permission from property owner must be attached.

Applicant Signature: _____ Date: _____

**Stanley Sewer Association RV hookup required.
Fee of \$30 required; cash/check.**

Office Use Only

Permit Approved: Yes / No Permit #: _____
Date Issued: _____ Date Expires: _____
Issuing Officer: _____