



(Official Use)

Permit #: \_\_\_\_\_

Permit Fee- \_\_\_\_\_

\$ Paid: \_\_\_\_\_ Check #: \_\_\_\_\_

APPROVED  
 DENIED

\_\_\_\_\_  
SIGNATURE OF ENFORCING AGENT

\_\_\_\_\_  
DATE ISSUED

**Permit Type:**

Initial  
 Extension

**Application Fee:**

Initial = \$50.00  
Extension = \$100.00

Building Department  
295 Closter Dock Road  
Closter, New Jersey 07624

Phone: (201) 784-0600 ext. 441 ♦ Fax: (201) 784-4711 ♦ Email: construction@closternj.us

# Storage Container Permit Application

1.) **PROPERTY ADDRESS:** \_\_\_\_\_ **BLOCK / LOT:** \_\_\_\_\_ / \_\_\_\_\_

2.) **APPLICANT:** NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
STREET CITY STATE ZIP

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

3.) **LAND OWNER:** NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
STREET CITY STATE ZIP

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

4.) **IS THE NEED FOR STORAGE CONTAINER(S) RELATED TO A CONSTRUCTION PROJECT?:**  YES  NO

5.) **IF YES, WHAT IS THE SCOPE OF WORK TO BE PERFORMED?:** \_\_\_\_\_

6.) **DOES THE WORK REQUIRE A CONSTRUCTION PERMIT ISSUED BY THE BUILDING DEPARTMENT?:**  YES  NO

7.) **HOW MANY STORAGE CONTAINERS WILL BE ON-SITE?:** \_\_\_\_\_

8.) **WHAT IS THE TOTAL CUBIC FOOTAGE OF ALL STORAGE CONTAINER(S)?:** \_\_\_\_\_

9.) **WHAT WILL BE THE CONTENTS OF THE STORAGE CONTAINER(S):** \_\_\_\_\_  
\_\_\_\_\_

10.) **HOW MANY DAYS WILL THE STORAGE CONTAINER(S) BE ON-SITE?:** \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

\* STORAGE CONTAINERS ARE PERMITTED TO REMAIN ON THE SUBJECT PROPERTY FOR AN INITIAL PERIOD OF (30) DAYS; IF THEY RELATE TO A CONSTRUCTION PERMIT FOR WORK BEING PERFORMED ON-SITE, THE INITIAL PERIOD SHALL BE (90) DAYS; UNDER EXTENUATING CIRCUMSTANCES, ADDITIONAL TIME MAY BE GRANTED BY THE BUILDING DEPARTMENT.

\*\* THE AGGREGATE OF STORAGE CONTAINERS CANNOT EXCEED (1,500) CUBIC FEET. THEY CAN BE SITUATED IN FRONT, SIDE AND REAR YARDS BUT MUST BE SETBACK A MINIMUM OF (5) FEET FROM PROPERTY LINES AND (10) FEET FROM THOROUGHFARES.