



(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 _____ FAX _____ EMAIL _____
- 3.) **LAND OWNER:** NAME _____
ADDRESS _____
STREET CITY STATE ZIP
PHONE _____ FAX _____ 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.