



# VILLAGE OF EAST HILLS

INCORPORATED JUNE 24, 1931

209 Harbor Hill Road, East Hills, New York 11576  
Telephone (516) 621-5600 • Fax (516) 625-8736

## APPLICATION FOR TEMPORARY STORAGE CONTAINER PERMIT

Project Location: \_\_\_\_\_

Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot(s): \_\_\_\_\_ Zone: \_\_\_\_\_

1. Owner(s): \_\_\_\_\_

Phone #: \_\_\_\_\_ Email(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

*If owner is a corporation or association, state name of officer authorized to make this application:* \_\_\_\_\_

2. General Contractor (Company): \_\_\_\_\_

Building Permit #: \_\_\_\_\_ Date Issued: \_\_\_\_\_

3. Duration of Storage Permit Requested: \_\_\_\_\_ months

I hereby swear or affirm that I am the owner of the above property and that all information furnished above and on supplemental documents are true and accurate. I understand that the storage unit must be placed entirely on the above property and that the permit placard must be placed conspicuously on the container itself. I further acknowledge that it is the owners responsibility to renew the permit prior to its expiration and that failure to do so may result in the issuance of summonses with fines up to \$1,000.00 per month or any part of a month that a permit has not been obtained. I understand that no temporary storage container may include electric or be used for occupancy of any kind.

Owner's Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Fee: \$150.00 for the 1<sup>st</sup> month + \$250.00 for each additional month.

**FOR BUILDING DEPARTMENT USE ONLY**

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

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

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

Application Fee \$ \_\_\_\_\_

Receipt # \_\_\_\_\_

Associated Building Permit #: \_\_\_\_\_