



TEMPORARY PERMIT FOR STORAGE CONTAINERS

Block: _____ Lot: _____ Placement Dates: ____/____/____ to ____/____/____

Location Owner: _____ Phone: _____ Email: _____

Location Address: _____ City: _____ State: _____ Zip: _____

Applicant Type: (check one) ☐ Contractor ☐ Homeowner ☐ Business

Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

EMERGENCY CONTACTS

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

CONTAINER OWNER CONTACT

Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Private Property Location

Any No bulk storage container, storage container, storage device, "pod", or similar container shall be placed or maintained by any private party in or on any Township property, street or right of way.

No bulk storage container, storage container, storage device, "pod", or similar container shall be placed or maintained on any private property unless it complies with one or more of the following provisions:

Such containers may be placed or maintained on a driveway or other suitable paved area for purposes of packing or unpacking goods and materials of owner or occupant of the property in preparation for or subsequent to moving into or out of the property for a period of not more than 21 consecutive days.

Such containers may be placed or maintained on a driveway or other suitably paved area for purposes of storing the goods and materials of the owner or occupant of the property when necessary during renovation or rehabilitation of the structure located on the premises in which the goods or materials would otherwise be located during the period of renovation or rehabilitation and up to 10 days prior to commencement and 10 days subsequent to completion of the work but in no event more than a total of 4 months.

The applicant is responsible for any damage to the roadway or other property caused by the placement of the storage container.

I have read the above application regulations and agree to abide by them. This permit may be renewed for an additional 5 days for a maximum of 3 times.

Signature of Applicant _____ Date Signed _____

FOR PENNS GROVE POLICE DEPARTMENT USE ONLY

APPROVED ☐ Police Approval by: _____ Date Approved: _____ Permit # _____

DENIED ☐ Conditions/ Reason for Denial: _____