

## STORAGE PERMIT APPLICATION

## **REQUIREMENTS:**

APPLICATION FEE: \$100.00

A Storage Permit is required for storage containers to be placed on property located within City Limits for a time period longer than seven (7) days. Storage containers may be permitted for a time period of no longer than six (6) months on the same or adjacent property as the property for which the building permit is effective. A one-time extension for the Storage Permit shall be available.

City of Watford City Municipal Code of Ordinances: CHAPTER XV ARTICLE XXII SECTION 11.

PROPERTY INFORMATION								
PROPERTY ADDRESS:					ZONING DISTRICT:			
PARCEL NUMBER:	SUBDIVISION:				LOT#	BLOCK #		
LEGAL DESCRIPTION: (SECTION, TOWNSHIP, RANGE)			IS PROPERTY ANNEXED?  U YES  NO / E.T.A.		LOCATED IN FLOODPLAIN?  YES* NO  FLOODPLAIN DEVELOPMENT PERMIT IS REQUIRED.			
PROPERTY OWNER INFORMATION								
OWNER NAME:		PHON	PHONE NUMBER:		EMA	EMAIL:		
MAILING ADDRESS:								
PERMIT APPLICANT INFORMATION								
APPLICANT NAME:		PHON	PHONE NUMBER: EM		EMA	MAIL:		
MAILING ADDRESS:								
DESCRIPTION Please give a detailed description of the storage container:								
OLZE OF OONTAINED		1	T) /DI		- OF O	ONTAINED		
SIZE OF CONTAINER:			TYPE OF STORAGE OF CONTAINER:					
ESTIMATED LENGTH OF TIME ON PROPERTY:			PROPOSED LOCATION ON PROPERTY:					
MATIAT								

NOTICE:

Permits are valid for six (6) months from the date of issue. Permits may be renewed thereafter. All applications, fees, and plans are subject to review, verification, and approval by the City Planning, Building, Engineering, and Public Works Departments prior to accepting payment and issuing permits. ALL PAYMENTS MADE TO THE CITY WILL BE NON-REFUNDABLE, NON-TRANSFERRABLE ONCE THE PERMIT IS ISSUED.



DO NOT SEND PAYMENT UNTIL THIS APPLICATION HAS BEEN REVIEWED AND APPROVED BY THE CITY.

SIGNATURE:					
As the applicant, I certify that all information given on this application is with and Utility Companies have been notified as necessary (811). understand that as a permit holder, it is my responsibility to notify The hereby give authorization to City Staff to access the permitted proper be occupied without first obtaining proper inspection(s) and/or the iss City Building Official. I understand that the City Building Official has the until all said requirements and conditions have been deemed satisfact inspection processes have been paid in full. I also understand that on non-refundable and non-transferrable.	Inspections are a required e City when any such inspirty as necessary and certifuance of a Certificate of Cone right to withhold the Certifly completed and all fee	d part of the permitting process and pections need to be performed. Thus, fy that the structure or property will no Doccupancy or Final Inspection from the ertificate of Occupancy/Final Inspection as associated with the permitting and/o			
APPLICANT SIGNATURE:		DATE:			
▼ OFFICE USI	E ONLY ▼				
BUILDING DEPARTMENT					
REVIEW DATE:/					
NOTES:					
PAYMENT:	PERMIT #:				
INVOICE NUMBER:					
DATE CREATED:/ BY:		/ BY:			
PAYMENT AMOUNT: \$	EXPIRATION DATE: _				
☐ CARD ☐ CASH ☐ CHECK#	FNTERED: /	/ RY·			

PAYMENT DATE: \_\_\_\_/\_\_\_/\_\_\_\_

ENTERED: \_\_\_\_/\_\_\_\_BY: \_\_\_\_\_