



CITY OF LAUREL

Community Planning and Business Services
8103 Sandy Spring Road • Laurel, MD 20707-2502
301-725-5300 • Fax: 410-792-2108

PERMIT NO.

PORTABLE STORAGE CONTAINER

DATE OF APPLICATION:

Please note: Per City Code Section 8-46- Residential Zones, allow for (1) portable storage container per property for no more than sixty (60) days per twelve month period. Portable storage containers cannot be placed in a public right-of-way (i.e. the street or on-street parking spaces) and must be at least 6 ft. from any property line. The maximum allowable size is: 8 ft. in height, 8 ft. in width, and 16 ft. in length.

DATE OF ISSUE:

ADDRESS OF PROPERTY:

OWNER OF PROPERTY (Name & Address):

TAX ID NO.:

DAYTIME CONTACT NUMBER:

APPLICANTS NAME & ADDRESS:

CONTAINER INFORMATION:

DIMENSIONS OF CONTAINER: _____
(length, width, depth)

LOCATION OF CONTAINER: _____
(PLEASE NOTE: CONTAINER CANNOT BE PLACED IN THE PUBLIC RIGHT-OF-WAY)

CONTAINERS ANTICIPATED DELIVERY DATE: _____

DAYTIME CONTACT NUMBER:

CONTAINERS ANTICIPATED REMOVAL DATE: _____

STORAGE CONTAINER PROVIDERS NAME AND ADDRESS:

ADDITIONAL NOTES OR INFORMATION (FOR USE BY APPLICANT):

PHONE NUMBER:

FEE: \$25.00

I do solemnly declare and affirm, under the penalties of perjury, that I am authorized, as owner or agent of the owner, to perform the proposed work and that I am authorized to make this application. I hereby certify that the application and contents are true and correct. Further I affirm that construction will conform to all current Building, Zoning and Handicap Accessibility Code requirements and. I understand that issuance of this permit does not exempt the proposed work from the conditions of permits required by other agencies and that **this permit will expire six (6) months from the date of issue, if no work has begun.** If work has begun, noticeable progress must continue. All work must be completed within 18-months from the date of issue.

SIGNATURE OF APPLICANT:

FOR OFFICE USE ONLY

Lot No.	Block No.	APPROVED by Planning & Zoning:	DATE:
Subdivision		APPROVED by Chief Building Official:	DATE:
Zoning Class		APPROVED by Department Director:	DATE:

CONDITIONS: