



THE BOROUGH OF DEMAREST ZONING DEPARTMENT  
 118 SERPENTINE ROAD, DEMAREST, N.J. 07627  
 (201) 768-0167 ext.110 [Mgreco@demarestnj.gov](mailto:Mgreco@demarestnj.gov)

## Application for a STORAGE CONTAINER ZONING PERMIT

PERMIT # \_\_\_\_\_

RECEIVED:

**§ 175-25 Off-street parking.**

(6) Temporary storage containers.  
 (b) Permit required. No temporary storage container shall be allowed at any site in the Borough of Demarest unless a storage container permit is issued prior to the placement of such unit for the length of time as provided herein

**ZONING REVIEW FEE:**  Storage Container (First 90 Days) - \$50  
 First Renewal- \$25 |  Second Renewal- \$25      Check#: \_\_\_\_\_

Location Address: \_\_\_\_\_

Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Use Type: \_\_\_\_\_

**Applicant Information**

Name: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

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

Email: \_\_\_\_\_

I, being of full age, hereby swear that all the information I have provided in the above application and the attached survey and / or plans are true and correct to the best of my knowledge.

\_\_\_\_\_  
*Print name*

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*

**ZONING OFFICER USE ONLY BELOW**

APPROVAL DATE \_\_\_\_\_

\_\_\_\_\_  
 Michael Greco, Zoning Officer

PERMIT DURATION \_\_\_\_\_  
*Start Date*

- \_\_\_\_\_  
*Expiration Date*