

CITY OF NEW CASTLE TEMPORARY STORAGE UNIT

Date Issued

	Date Issued.
Your Name	
If you are a renter proper	ty owners name.
If you are a renter, proper	ty owners name:
Property Address:	
Delivery Date:	Removal Date:
Delivery Date.	Removal Date:
Fee Paid:	
Location of Unit on Prope	erty:
-	(If unit will be on a street, permit can only be issued for 72-hour period.)
Important Information:	
Maxim number of	of days permit is valid:
7 days if unit will 72 hours if locate	l be placed off Street, on driveway, pad or ground
Fees and Penalties:	od on Street.
• Permit Fee - \$25.0	•
• Late Fee - \$50.00	if portable storage unit is on site before obtaining a permit.
	City Use Only
cc: City Administrator	• Finance Department • Police Department • Code Enforcement
Fee Received:	Date:
Approved:	Date:

PLEASE POST PERMIT SO THAT IT IS VISIBLE FROM THE STREET