

**ZONING DEPARTMENT
TEMPORARY USE PERMIT APPLICATION
FOR TEMPORARY STORAGE UNITS/DUMPSTERS
Township of Parsippany-Troy Hills
1001 Parsippany Boulevard
Parsippany, NJ 07054
973-263-4373**

Permit Fee: \$25.00

Applicant: Please fill in all information.

Address and/or Location: _____

Block: _____ Lot: _____ Zone: _____

Property Owner Name: _____

Property Owner Address: _____

Property Owner Daytime Telephone Number: _____

Storage Unit Company: _____

Storage Unit Address: _____

Storage Company Daytime Telephone Number: _____

Circle Proposed: Dumpster or Storage Unit

Size: _____ X _____

Date From: _____ Date To: _____

Before a permit is issued the Zoning Department requires the following:

Letter of permission from property owner

A copy of a property survey (scalable) with the approximate location where the dumpster or storage unit is proposed.

Applicant's Signature: _____ Date: _____