



6000 Heritage Trail, Clayton, CA 94517
 925-673-7300 www.claytonca.gov

FOR OFFICE USE ONLY
File No:
Fees/Deposit:
Credit Card Approval Code:
Date Received:

Temporary Storage Permit Application

1. GENERAL INFORMATION

Please complete the items listed below. Application and processing fees must be paid when the application is submitted.

Applicant	Name:	
	Address:	
	Phone:	Email:

Property Owner	Name:	
	Address:	
	Phone:	Email:

2. REQUIRED INFORMATION

Please fill out the information below regarding your request. Include a site plan showing the location and layout of the property. Attach additional sheets as needed.

ADDRESS REQUIRING TEMPORARY STORAGE PERMIT:	
DATES OF TEMPORARY STORAGE:	HOURS OF TEMPORARY STORAGE:
From: _____ To: _____	From: _____ To: _____

3. DESCRIPTION OF TEMPORARY STORAGE

Please fill out the information below regarding your temporary storage. Include a site plan showing the location and layout of the proposed temporary storage.

Attach a separate sheet as needed:

4. SUBMITTAL REQUIREMENTS

- _____ Temporary Storage Permit Application
- _____ Applicable fees
- _____ Written Statement describing where the personal property will be stored
- _____ Dates temporary storage will be in effect
- _____ A site plan showing the location of the proposed storage area
- _____ Photographs of the site showing the view of and from the site, including neighboring properties

5. Certification:

The applicant hereby agrees to comply with all the applicable sections of the City of Clayton Municipal Code.

<p>I (We):</p> <ul style="list-style-type: none"> Consent to the submission of this application. Understand that an incomplete application may be denied. Hereby declare under penalty of perjury under the laws of the State of California that the information in this application and its attachments are true, complete, and correct. Certify to have read and understand Title 17, Chapter 17.76, found in the City of Clayton’s Municipal Code. <p>I (We):</p> <ul style="list-style-type: none"> Understand that following receipt of a complete application, staff will review the application and that recommendations may be provided by the Chief of Police, the Maintenance Department, and the Community Development Department. The Community Development Director may either: 1) approve the application, subject to conditions that protect the general health, safety, and welfare of the community; or 2) deny the application. Understand that denial of the application by the Community Development Director is not an appealable action, and upon any such denial, the applicant, in lieu of appeal, may apply for a variance under the provisions of Title 17, Chapter 17.52 of the Clayton Municipal Code. 	
APPLICANT SIGNATURE:	DATE:
PROPERTY OWNER SIGNATURE:	DATE:

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<p>_____ Approved</p>	<p>_____ Denied</p>	<p>_____ Community Development Director</p>	<p>_____ Date</p>
<p>Comments:</p>			