Borough of Sea Girt
Portable Storage Unit

Permit

Permit Number:_____ Date:_____

Fee: $25.00

Paid: Cash _____ Check # _____

Owner & Address of Unit:_____
_____

Arrival date of Unit: _____

Removal Date of Unit:_____

Note: Unit on-site replacement may not exceed more than 15 days in any 365 day period.

Approved: _____

CC: Zoning Officer
Sea Girt Police Department