



TEMPORARY STORAGE STRUCTURE REGISTRATION

VILLAGE OF BERGEN

11 North Lake Avenue, PO Box 100, Bergen, NY 14416

Phone: (585) 494-1513 Fax: (585) 494-1730

Name: _____ Phone: _____

Mailing Address: _____ Email: _____

Status: Owner Renter Lessee Other _____

Size of Unit: _____

Delivery Date: _____

Removal Date: _____

The Unit Shall be located at address for a maximum of thirty consecutive days, including days of delivery and removal.

Supplier's Name: _____ Phone: _____

Unit Location on property: *(give brief description and attach sketch)*

Active Building Permit: _____

All Temporary Storage Structures should follow regulations in section **§5-19 Temporary Storage Structure** in the Village of Bergen Zoning Law.

Signature: _____ Date: _____

Printed Name: _____

Date approved: _____
By: _____

Code Enforcement Officer: 585-331-6162
Village of Bergen website: www.villageofbergen.com
Zoning Law available on Village website