



Temporary Storage Container Permit Application

(Permit Fee – \$30.00 - Payable to Canonsburg Borough)

Permit Number: _____

Date Issued: _____

Effective Date – from: _____ to: _____

Permit shall be for 30 days ONLY, unless extension is approved by the Borough Manager or the
Zoning and Code Enforcement Officer

Applicant Name: _____

Applicant Address: _____

Applicant Phone Number: _____

Property Address for container: _____

Property Location of container: _____

Applicant Signature

Date

Zoning Officer Signature

Date

68 EAST PIKE STREET, CANONSBURG, PA 15317

PHONE (724) 745-1800 FAX (724) 745-8850