## REQUEST TO ALLOW A TEMPORARY POD STORAGE CONTAINER IN A RESIDENTIAL ZONING DISTRICT

Date	
I,(print name)	_ request permission to place a POD storage container
container at the following address	·
By my signature, I am aware that the ap	proval of the temporary placement of the POD storage
container is valid only from	to, a total period of time of
days. The placement of the	ne container must meet City Municipal Code
requirements. I have provided a site pla	an or picture that identifies the location of the proposed
container. I am aware the Planning Divi	ision will verify the unit has been removed at the end of
the allowed period of time.	
Signature	
Telephone Number	