APPLICATION FOR TEMPORARY STORAGE PERMIT FOR UNLICENSED OR UNREGISTERED MOTOR VEHICLES

Chapter 209-3C of the City Code of the City of Beacon Addresses Temporary Storage Permits
Please review this chapter of the code before filling out this application form.

1. This application must be completely filled in and submitted to the Building Inspector.

2. A permit does not allow for work on the vehicle at the storage location. All work must be done in a fully enclosed garage according to the City Code.

3. *The permit can only be issued to an occupant upon application of the real property owner.*

4. Vehicle must be on an approved driveway. Please provide a sketch or on the back of this sheet where the vehicle will be stored in relation to the house, any garage and the abutting streets. Also attach a picture of the proposed storage location.

OWNER INFORMATION
Property Address (location where vehicle will be stored):

Property Owner Name: ____________________________

Address: ____________________________

City: ____________________________ State: ___________ Zip Code: ____________

Phone Number: ____________________________

Email Address: ____________________________

I, the undersigned, am the owner of the above property. I understand that this permit, if issued, is only for the dates above. The City Administrator may revoke it, if in his/her discretion, such revocation will safeguard the public health, convenience and general welfare. I also certify that the vehicle will not fall under the term junked vehicle as defined in section 209-2.

Owner Signature__________________________ Date: ________________

See reverse side
**Occupant/Vehicle Owner.**

Name of Occupant/Vehicle Owner: ____________________________________________

Address: __________________________________________________________________

City: ___________________________ State: _______________ Zip Code: ______________

Phone Number: ____________________________________________________________

Alternate Phone Number: _________________________________

Email Address: ____________________________________________________________

Address where vehicle will be stored: _________________________________________

Period of time vehicle will be stored (not more than twelve months):

From Mo____Da____Yr_____ to Mo____Da____Yr_____

Description of vehicle: _____________________________________________________

Make     Model     Color     Year

Registered: ___yes___no  License Plates: _________________________________

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**For office use only:**

PERMIT FOR TEMPORARY STORAGE to above named occupant is:

_____ granted for period.  From Mo____Da____Yr_____ to Mo____Da____Yr_____

Under the following conditions:______________________________________________

_____ denied.  Reason denied:______________________________________________

Signature __________________________ Date: __________________________

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**Permit fee:       $50.00**

**Please return all completed applications:**

Building Department, One Municipal Plaza, Beacon, NY 12590