



Storage Container

Building Department
310 Navajo Trail • Burns Harbor, IN 46304
P 219-787-9187 • F 219-787-0015



buildingclerk@burnsharbor-in.gov • www.burnsharbor-in.gov

Date: _____

No. _____

Applicant _____

Phone _____

Email _____

Owner _____

Address _____

Legal Description _____

Provide a plat showing the location of the storage container.

Use (Check One):

- Moving Pod
- Construction Container
- Temporary Use for Commercial Purposes
- Long Term Use for Commercial Purposes
- Residential Storage (Non-Permitted Use)

Zoning District

- All
- All
- RC2, BP, Special Use
- RC2, BP, Special Use

Permit Period

- 10 Days
- 1 year or COO
- 10 Days
- Annually

I, as Applicant for this permit assume the responsibility to be aware of and to comply with all applicable town, state, and federal ordinances, codes, and statutes, land covenants, easements, and restrictions.

Applicant Signature

Date

Storage Container Permit Fee \$ _____

Renewal Fee \$ _____

Inspection \$ _____

Reinspection Fee \$ _____

Building Commissioner Signature

Clerk Signature

Date Issued

