



104 W. 3rd Street Grove, Oklahoma 74344
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STORAGE CONTAINER PERMIT APPLICATION

Date : _____

Property Owner: _____

Address: _____

City State Zip Phone

Container Location: _____

Type of Container: ___ Mobile Storage Container ___ Portable Onsite Storage Container

Use of Container: _____

Size of Container: _____

Type of Screening: _____

***** OFFICE USE ONLY *****

Zoning District of Location: _____ Screening Required: _____

Date Container is placed in location: _____

Date Container shall be removed: _____

Permit approved by:

Building Inspector

Date