



City of Gulf Breeze

PORTABLE STORAGE UNIT EXTENSION REQUEST

Date: _____

I, _____, hereby request an extension to the
Portable Storage Unit (PSU) Authorization issued by the City of Gulf Breeze for

_____ on _____
Address Date

I am making this request for the following reason(s):

The completion of this form does not automatically mean that the extension is approved. It must be reviewed and approved by City staff. You will be issued a formal authorization similar in nature to the original. The cost for a PSU extension is ten dollars (\$10.00). The extension is only good for ninety (90) days. Each extension is reviewed on an individual basis and on its own merits. A previous extension is not grounds for an authorization.

AGENT'S SIGNATURE

OWNER'S SIGNATURE

AGENT'S PRINTED NAME

OWNER'S PRINTED NAME

DATE

DATE

REV. 08/17