

Application No.:	MSC
Date Received:	
Approved By:	
Approval Date:	

**City of Hemet**  
PLANNING DIVISION  
445 E. Florida Avenue, Hemet, CA  
92543  
(951) 765-2375

**METAL STORAGE CONTAINER PERMIT APPLICATION**

**Property Information**

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Name of Center: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Zoning: \_\_\_\_\_ APN(s): \_\_\_\_\_

**Applicant Information – the Applicant is the designated contact to receive materials from the City.**

Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant's Interest in Property:     Own         Rent        Other: \_\_\_\_\_

**Owner Information – Consent Affidavit required if Applicant is not the Property Owner**

Owner Name: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**APPLICANT CERTIFICATION**

- Existing business with an existing metal storage placed on the property prior to February 11, 2016. These businesses are eligible to apply for a hardship determination **if** the application for a Metal Storage Container Permit is submitted prior to August 11, 2016.
- New business or new request for a metal storage container permit, subsequent to February 11, 2016.
- I agree to meet the operational standards of Sec.90-82(g) and understand that a violation of the standards will result in the revocation of the Metal Storage Container Permit and removal of the container from my property.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**B. DETERMINATION OF USE.**

1. List of any hazardous materials to be stored in the metal storage container such as propane tanks, chemicals, gasoline, oil, or flammable materials. \_\_\_\_\_  
\_\_\_\_\_

2. The metal storage container will be provided with interior lighting, refrigeration, or other electrical service  
 Yes      or       No

3. Description of the color and condition of the metal storage container. Provide photographs of the container on all four sides, the property site, and street view. \_\_\_\_\_  
\_\_\_\_\_

4. Plot Plan. Draw here or provide on a separate sheet. Show the property lines, buildings, parking, drive aisles, and the proposed location of the metal storage container. Label the distance in feet of the container from the property lines. Show/label any walls, fences, or landscaping used to screen the container from public view.

Front property line. Name of Street: \_\_\_\_\_

**C. REQUEST FOR HARDSHIP DETERMINATION (Only for eligible existing businesses)**

I am requesting a Hardship Determination because I cannot meet the following requirement(s) of Sec. 90-82(g): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that to be granted an exemption from one or more of the requirements of Sec. 90-82(g) the following findings must be demonstrated by the applicant and approved by the Community Development Director:

1. There are unique physical circumstances applicable to the subject land, including size, shape, topography, location, or surroundings; and
2. The strict application of the provisions of Sec. 90-82(g) would deprive the property of the right to use the land in a manner enjoyed by other conforming property in the vicinity; and
3. The approval of a hardship determination does not constitute a grant of special privileges which other conforming properties in the vicinity do not enjoy.

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FOR STAFF USE ONLY

1. Date of Site Visit \_\_\_\_\_

2. Observations \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Determination:

Approved.

Approved with the following condition(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Approved with the following hardship determination: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Denied for the following reason(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Planner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Community Dev. Director

\_\_\_\_\_  
Date