

City of Scappoose
33568 East Columbia Avenue
Scappoose, Oregon 97056
503-543-7146

Mobile Container/Box includes:

- Portable Storage Containers
- Dump Boxes

Application for Right-of-Way Permit for placement of a Mobile Container/Box

Pursuant to Scappoose Municipal Code Chapter 12.12 Public Rights-of-Way:

12.12.040 City permission requirement. Other than public vehicular and pedestrian traffic, no person may use, occupy or encroach on or in a public right-of-way without the permission of the city. The city grants permission to use rights-of-way by franchises, licenses and permits.

Pursuant to Scappoose Municipal Code Chapter 17.102 Visual Clearance Areas:

17.102.020 Visual clearance--Required. A. A visual clearance area shall be maintained on the corners of all property adjacent to an unregulated intersection of two streets, a street and a railroad, or a driveway providing access to a public or private street.

The City Manager or designee may, upon review of this mobile container/box right-of-way application, ask for and the applicant must submit prior to issuance of a permit, additional documentation of the use or specifications for allowing such use. Please allow plenty of time for the approval process.

Applicant's Name (please print) _____

Physical Address _____ Mailing Address: _____

Phone Number _____ Other Contact Number _____

Location of mobile container/box _____
(mobile container/box cannot block sidewalks or driveway unless it is your private driveway)

Nearest Cross Streets _____

Size of mobile container/box _____ Reason for mobile container/box _____

Beginning Day of Use _____ Ending Day of Use (4-Days Max) _____

Contact information for company supplying the mobile container/box (Include after hours numbers). _____

All Mobile Containers / Boxes must have safety reflective tape on corners and a traffic safety Cones will need to be placed on the roadway by the front and rear of the Mobile Container/Box. (Traffic safety cones are not supplied by City of Scappoose).

By signing below I acknowledge that I am the responsible person for using the right-of-way for a Mobile Container/Box only and I am responsible for having the Mobile Container/Box removed on or before the ending date noted on this application.

Applicant's Signature _____ Date of Signature _____

OFFICE USE ONLY:

Received by _____ Date _____

Approval of City Manager or designee: _____ Date _____

Permit # _____ **A mobile container/box right-of-way permit cannot be issued without the City Manager or designee's approval.**

Approval from Scappoose Fire District

Date

Approval from Scappoose Police Department

Date

Please see back of this form to put information on diagram

White: City of Scappoose

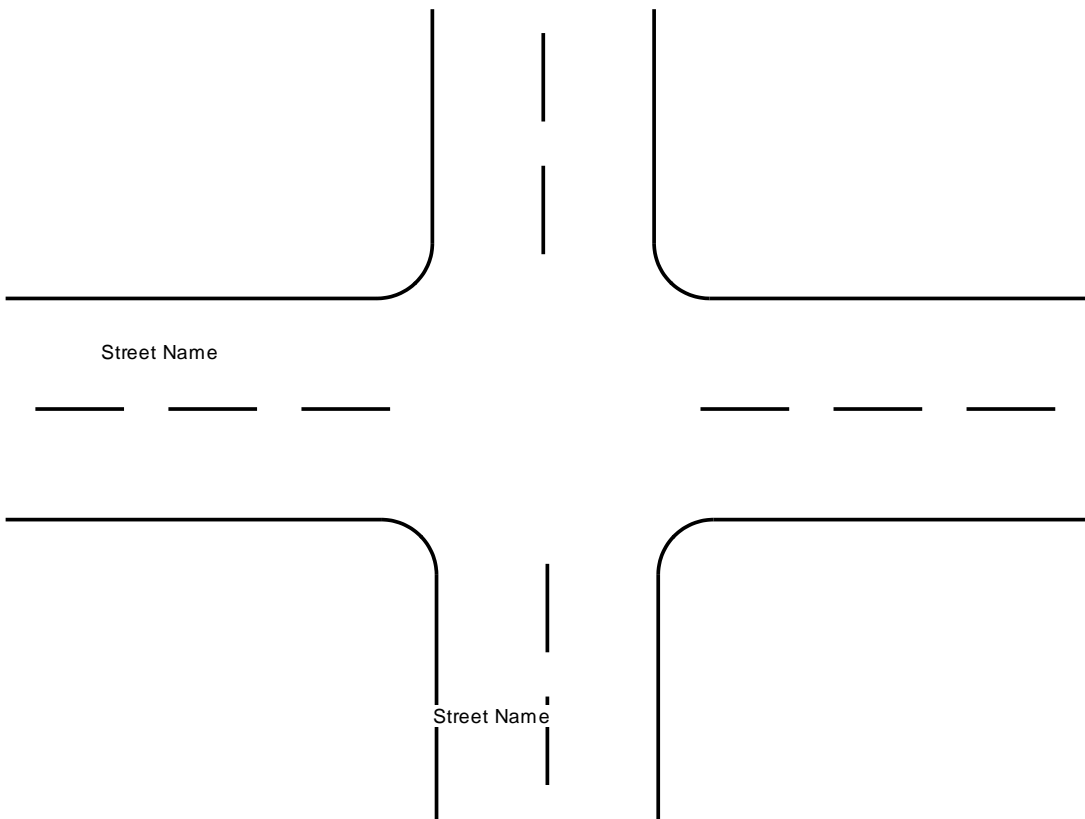
Pink: Applicant

Yellow: Police Department

Please indicate the following:

- **Box Drop Off Location**
- **Indicate traffic safety cones placement**
- **Street Names**
- **Primary house/building location if applicable**
- **Draw Driveway of address**
- **Draw House if applicable**
- **Location of closest Fire Hydrant**
- **Distance from the intersection**

NOTE: All Mobile box/containers must be up next to sidewalks and approximately 30 feet away from any intersections.



White: City of Scappoose

Pink: Applicant

Yellow: Police Department