

Storage Unit Policy (Draft)

This policy outlines the terms and conditions for the placement and use of personal storage containers (“units”) on City of Alameda Recreation and Parks Department (“ARPD”) property. The intent is to efficiently manage the approval, placement, and use of units while ensuring equitable access to storage opportunities across recreation facilities and parks.

Categories and Fees

Storage units are classified into three (3) categories based on size and type. Fees are assessed annually and will be due in full prior to the delivery of the unit at the specified location.

Category	Type of Unit	Annual Fee
Small	Knaak Boxes or similar small containers	\$50
Medium	Sheds or mid-sized storage structures	\$100
Large	Shipping Containers or similar large storage units	\$150

Terms, Conditions, and Renewal

The Department will review each request to ensure accessibility and compatibility with routine park and maintenance operations. Delivery, installation, and/or placement of any unit is strictly prohibited until the application has been reviewed, approved and written confirmation has been issued by ARPD. Any unit installed without prior approval will be removed without notice and will be responsible for any fees associated with removal should ARPD become involved. Units must be placed in the approved locations only. Any relocation or modification requires additional written approval.

The standard agreement term is one (1) year from the effective date of approved delivery and placement. Users wishing to continue beyond the one-year term must submit a renewal application at least thirty (30) days before the end of the current term. Users who miss this deadline may still submit a renewal application within ten (10) days after the term expires but will incur a late fee. Failure to submit a renewal application within this grace period will result in the unit's immediate removal by ARPD. Similarly, users who do not intend to renew must remove their unit from the premises within ten (10) days following the expiration of the term. As noted above, failure to remove the unit by the communicated deadline will result in ARPD removing it. In all cases of ARPD removal, users are responsible for all associated fees.

Continued placement is contingent upon written approval from the Department, payment of all applicable fees, and adherence to policy requirements. The Department reserves the right to relocate or remove any storage unit at its discretion due to operational, safety, environmental, or public considerations.

The Department assumes no liability for loss or damage to any storage unit (authorized or unauthorized) or its contents resulting from relocation, removal, vandalism, weather or other causes. The applicant is responsible for maintaining the unit's appearance, ensuring it remains safe, presentable, and appropriate for public use.

Application

All individuals or organizations (“users”) requesting the placement of a unit are required to complete a Storage Unit Request Form that includes:

Applicant Information

- **Applicant / Organization Name:** _____
- **Primary Contact Person:** _____
- **Phone:** _____ **Email:** _____
- **Mailing Address:** _____

Storage Unit Details

- **Requested Unit Size (check one):**
 - ☐ Small (Knack Box) – \$50/year
 - ☐ Medium (Shed) – \$100/year
 - ☐ Large (Shipping Container) – \$150/year
 - **Proposed Park Location:** _____
 - **Specific Location Within Park (attach map or photo if possible):** _____
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- **Purpose of Storage Unit:** _____
- **Requested Duration of Placement (Start–End Dates):** _____

Acknowledgment and Signature

By signing below, I acknowledge that I have read, understood, and agree to comply with all terms and conditions outlined in this policy. I understand that failure to comply may result in removal of the storage unit and forfeiture of fees paid.

Applicant Signature: _____ **Date:** _____
Print Name: _____

ARPD Use Only

Reviewed By: _____ **Date Received:** _____ **Approved / Denied:** _____ **Fee Paid:** _____
☐ Approved ☐ Denied \$ _____

Authorized ARPD Signature: _____
Date of Approval: _____