

DATH MPTON COUNTY	
umpster Permit Application	Permit #

Official Use Only:

Date received:

	Dumpster Perr	nit Application	Permit #	
Check one: Residential Owner:	Residential Tenant:	Commercial:		
Dumpster Delivery Date	o:			
(<u>if dumpster is pre.</u>	e:sent on site for more than on is proposed to be placed on	ne week, a \$50.00 zoning p		
Road name (1) aumpster	is proposea to be placea on	or wunun ine kigni oj wa	y oj a public roda):	
Applicant Name:				
Phone Number: _				
Email:				
City:		State: PA Zip:		
Address of proposed du	mpster location:			
Property Owner 1	Name (if different):			
Location of the dumpster (attach sketch of property with dumpster location):				
Size of dumpster:				
Reason for the dumpste	r:			
If dumpster is proposed to be permanent, application must include a copy of the contract with garbage hauler and schedule for pick-up.				
Signature of Applicant		Date	<u> </u>	