



APPLICATION FOR DUMPSTER PERMIT

I. OWNER INFORMATION			
Project Address			
Owner's Name	Cell Phone	Email	
Owner's Address	City	State	Zip
RESPONSIBLE PARTY; In Case of EMERGENCY after Hours Phone #	NAME;	PHONE;	

II. INFORMATION		
Dumpster Use (Check all that Apply) <input type="checkbox"/> New Building <input type="checkbox"/> Building Demolition <input type="checkbox"/> Addition <input type="checkbox"/> Remodel/Alteration <input type="checkbox"/> Household Cleaning <input type="checkbox"/> Repair/Replace <input type="checkbox"/> Other _____	Proposed Use <u>Residential</u> <input type="checkbox"/> One Family <input type="checkbox"/> Two or More Family Enter # of Units _____ <input type="checkbox"/> Garage <input type="checkbox"/> Other _____	<u>Nonresidential</u> <input type="checkbox"/> Industrial/Manufacturing <input type="checkbox"/> Stores/Retail <input type="checkbox"/> Service Station/Repair Garage <input type="checkbox"/> Hospital/Institutional/Schools <input type="checkbox"/> Office/Bank/Professional <input type="checkbox"/> Other _____
Additional Information:		
Dumpster Rental \$:		

III. REFUGE HAULER			
Contact Person	Company		
Address	City	State	Zip
Phone/Fax	Email		