

BOROUGH OF PERKASIE

620 West Chestnut Street • P.O. Box 96 Perkasie, Pa. 18944

Phone 215-257-5065 Fax 215-257-6875

PERMIT APPLICATION FOR PLACEMENT OF A DUMPSTER AND/OR A MOVING CONTAINER ON A PUBLICLY MAINTANED ROAD

NAME:	
ADDRESS OF APPLICA	T:
PHONE:	EMAIL:
**STREET ADDRESS O	DUMPSTER TO BE PLACED:
DATE RECEPTACLE PL	CED ON STREET:
DATE DUMPSTER TO B (No later than 14 days)	REMOVED FROM STREET:
SIGNATURE: Paved surface must be to paved surface	DATE: protected from damage. Permit holder responsible for any damage
APPROVED:	DATE:
· · · · · · · · · · · · · · · · · · ·	in street must be placed in the parking lane of the street as close t as possible. All dumpsters must be equipped with 2 or more red o on-coming traffic.
☐ If checked, a Type I dumpster facing on-co	arricade with flashing amber light must be placed 5 feet in front o ning traffic.
C: Police Departm	nt