



Date _____

Name of business _____ Phone _____

Address _____ Zip code _____

Name of property owner _____

Location of dumpster _____

Size of dumpster _____

Date to be placed _____ Date to be removed _____

Dumpster lid _____ Dumpster lighted _____ Dumpster reflectors _____

Dumpster reflectorized tape _____ Identification on dumpster _____

(Dumpster must be visible to traffic from at least 300 feet from sunset to sunrise.)

I hereby certify that the above information is true and correct. In addition, I agree to comply with all rules, regulations and ordinances governing this application as contained in the effective ordinances, orders, laws and acts of the Borough of Hollidaysburg. I further agree to be bound by any special conditions, restrictions and regulations as may be imposed by the Borough Manager.

Applicant's Signature

Date

Fee paid _____ Date permit issued _____ Date permit expires _____

Signature of Borough official

Date