

**BROOKLAWN BOROUGH
301 CHRISTIANA STREET
BROOKLAWN, NEW JERSEY 08030**

856-456-0750 x 105

856-456-1874 FAX

DUMPSTER PERMIT

CONTRACTOR

Name: _____ Phone: _____

Address: _____

Emergency Phone Number (Night):

1. _____ 2. _____

HOMEOWNER/BUSINESS

Name: _____ Phone: _____

Address: _____

Location of Dumpster: _____

An application is hereby made to permit the placement of a waste refuse container, commonly known as a roll-off dumpster or roll-off container on or along the above listed roadway. It is agreed that any dumpster or container placed on or along the roadway shall be equipped with markers consisting of all yellow reflective diamond-shaped panels having a minimum size of 18 inches by 18 inches. These panels shall be mounted at the edge of the dumpster or container at both ends nearest the path of passing vehicles and facing the direction of oncoming traffic. These markers shall have a minimum height of 3 feet from the bottom of the panels to the surface of the roadway. If approved, this permit shall be valid for a period of 7 days, and may be renewed by the approving authority for additional 7 day periods but not to exceed more than a total of 30 days. The applicant is responsible for any damage to the roadway or other property caused by the placement of the dumpster or container.

Signature of Applicant: _____ Date: _____

Approved by: _____ Date: _____

Denied by: _____ Date: _____

Reason for denial: _____
