

***TEMPORARY DUMPSTER PERMIT APPLICATION***

BOROUGH OF SMITHTON

Established in 1901

615 Center Street, PO Box 374

Smithton PA 15479

smithtonboro@hotmail.com

Phone/Fax (724) 872-6406

APPLICANT’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE:

PHONE # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL ADDRESS:

MAILING ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE: \_\_\_\_\_\_\_ ZIP: \_\_\_\_\_\_\_

LOCATION OF DUMPSTER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , SMITHTON, PA 15479

DUMPSTER PROVIDER:

REASON FOR DUMPSTER:

EXPECTANT DATE WILL BE PLACED: LENGTH OF TIME:

SPECIAL CONDITIONS (if any)

***OFFICE USE ONLY:***

Date Received: Date permit must be issued by:

Approved Denied

Conditions of approval/reason for denial:

Amount Permit Fee Paid: Date Paid:

Date of First Renewal: Date Paid:

Date of Second Renewal: Date Paid: