

BOROUGH OF WILMERDING

Dumpster Permit Application

Phone 412-823-0420
P.O. Box 8
Wilmerding PA 15148

PROPERTY OWNERS NAME: _____
OWNERS MAILING ADDRESS: _____
OWNERS PHONE NUMBER: _____
LOCATION OF PROPERTY: _____
DIMENSIONS & CAPACITY OF DUMPSTER _____
DESCRIPTION OF WORK BEING DONE _____
DATE OF COMPLETION OF WORK _____
LOCATION OF DUMPSTER (street, alley, yard...) _____
MATERIALS TO BE DISPOSED OF _____

SIGNED: _____ DATE: _____

**PERMIT VALID FOR 30 DAYS FROM DATE OF ISSUE.
PERMIT MUST BE DISPLAYED.
ALL CONTAINERS MUST PROVIDE FOR COVERS OR LIDS, MUST BE ILLUMINATED BY
REFLECTORS OR LIGHTS AND MAY NOT BE FILLED ABOVE THE LEVEL OF THE LID
OR COVER.**

AMOUNT RECEIVED: _____ Authorized _____

Name + Phone # of Dumpster Company
\$30.00 Fee