CITY OF FROSTBURG

TEMPORARY DUMPSTER PERMIT APPLICATION



DEPARTMENT OF COMMUNITY DEVELOPMENT
CITY HALL
59 E. MAIN STREET, P.O. Box 440
FROSTBURG, MD 21532

PERMIT NO.

Applicant's Name:				Phone No.:
Applicant's Address:				
Property Owner's Name (if different than Applicant):				Phone No.:
Property Owner's Address:				
Proposed Dumpster Location:	l addrace.	ar diet	t-acc and dire	ection from nearest intersection (draw schematic on separate sheet if necessary)
Timeframe for Dumpster - Begin Date:				End Date:
Will the dumpster be placed on a street?	Υ /		N	If Yes, which Street:
If Yes, is there a off-street parking spaces of	or a sho	oulde	r on which	to place the dumpster? : Y / N
	change t	to pro	oposal witho	oble hereto, and further agree than any misstatement or misrepresentation of out approval of the agencies concerned, shall constitute sufficient grounds for iolations of the City Code.
Applicant's Signature:	-		9	Date:
FOR CITY USE ONLY Approvals required:	Appro	ıval G.	ranted?	Granted by (Signature):
☐ Frostburg Police Department	Υ Υ	/	N	
☐ Frostburg Street Department	Υ	/	N	· · · · · · · · · · · · · · · · · · ·
☐ MD State Highway Administration	Υ	/	N	provide copy of SHA Permit & attach
STIPULATIONS:			5-	
Application Date:	Permit Issue Date:		e Date:	Issued by:
				rom (begin date):
to (end date): and is subject to the following conditions:				
to (ond date).		J11.C	10 000,0	to the following conditions:
☐ The temporary dumpster perm	nit is D)EN	IED.	•
PLEASE POST PERMIT IN A CONSPICUOUS LOC	'ATION			