

**Borough of
Ephrata**



*location
of choice*

124 South State Street, Ephrata, PA 17522
717-738-9202 / 717-733-4062 (Fax)

R1

R2

APPLICATION FOR A TEMPORARY DUMPSTER PERMIT

Name of Applicant _____

Mailing Address _____
of Applicant _____

Phone Number _____

Dumpster Provider _____

Reason for Dumpster _____

Location of Dumpster _____

Exact Date Will Be Placed _____

Length of Time of Dumpster _____

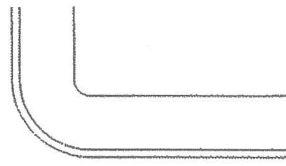
Special Conditions (if any) _____

I have read the Temporary Dumpster Requirements and agree to adhere to those requirements and the requirements as outlined in the Code of the Borough of Ephrata, Chapter 277, Article IV, Temporary Dumpsters on Street, at all times.

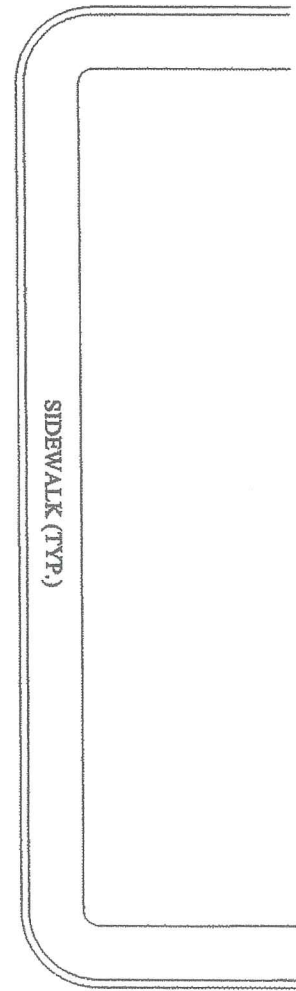
Date

Signature of applicant or authorized agent

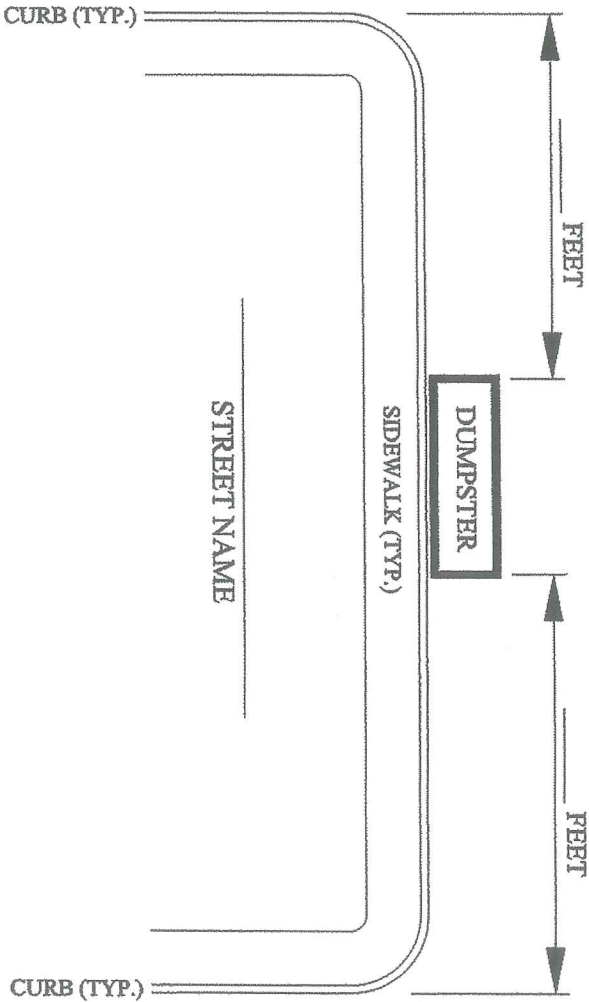
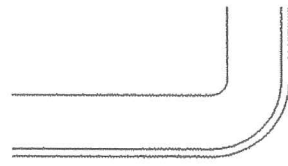
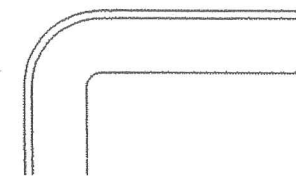
NOTE: Show any Fire Hydrant, Driveways and Handicap Ramps within 20 Feet of the Dumpster.



STREET NAME



STREET NAME



NAME OF APPLICANT _____

Borough Approval Sheet For Temporary Dumpster Permit

Date Received _____ Received By _____

Date permit must be issued by _____

Approved _____

Conditions of Approval _____

Denied _____

Reason for Denial _____

Permit Fee Paid _____ Date Paid _____

Date of First Renewal _____ Date Paid _____ Issued By _____

Date of Second Renewal _____ Date Paid _____ Issued By _____