



## Dumpster/Roll Off Container Permit Application

10 Reeve Ave  
Haddon Township, NJ 08108  
856-854-1176 x6266

**PLEASE NOTE: INCOMPLETE APPLICATION WILL NOT BE PROCESSED UNTIL ALL REQUIRED INFORMATION IS SUPPLIED.**

### Property Information:

Street Address: \_\_\_\_\_

### Owner Information

Property Owner Name: \_\_\_\_\_

Property Owner Address (If different from above): \_\_\_\_\_

Owner Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Owner Email: \_\_\_\_\_

### Container Information:

Owner of Container: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Location where container will be stored/Placed: \_\_\_\_\_

*\*Fee waived for containers placed on private property*

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Container must be legally placed, approved and designated by Township authorities, equipped with appropriate reflectors. ***Valid for a period of five days with permit prominently displayed on container or facility. (See article 186-10)***

Fee \$25.00 Cash: \_\_\_\_\_ Check #: \_\_\_\_\_ Permit Extension: \$15/5 days

Dumpster Fees: 1-5 days = \$25 6-10 days = \$40 11 -15 days = \$55

16 – 20 days = \$70 21 -25 days = \$85 26-30 days = \$100

**Authorization:**

(Circle One Please): I am the Property Owner/ Contractor/ Tenant/ Other (Specify \_\_\_\_\_) making this application. I certify that the owner of record has authorized the proposed work and, as his/her/their agent, we agree to conform to all applicable laws and regulations of this jurisdiction.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please see Ordinance #1212 for further clarification regarding fees, fines, deadlines, responsibilities and violations.

**PLEASE ALLOW 5 DAYS FOR PROCESSING PRIOR TO START DATE.**