

# Application for Dumpster/POD Permit

Aspinwall Borough 217 Commercial Avenue, Aspinwall PA 15215 (412) 781-0213 Fax (412) 781-2233

## I. APPLICANT INFORMATION

Name	Address (#, Street, City, State, Zip Code)	Telephone
Applicant		
Owner of Record		
Contractor		

Type: Dumpster or POD

I hereby certify that the proposed work is authorized by the owner of record and I am the owner's authorized agent to make this application, and I/we do hereby agree to conform to all applicable ordinances of the Borough.

Signature of Applicant	Address	Date

## II. SITE LOCATION

At (location)

---

Street Address

---

## III. DATES

Date of Dumpster/POD delivery	Date of Dumpster/POD pick up

Fee enclosed  
\$50 – 2 weeks and under (refundable)  
\$100 – 2 weeks to 8 weeks (non-refundable)

OFFICE USE:  
Application Date:  
Check No.  
Date of Returned Check: