



**BURLINGTON TOWNSHIP POLICE DEPARTMENT
TRAFFIC SAFETY UNIT**

**851 OLD YORK ROAD
BURLINGTON TOWNSHIP, NJ 08016
609-386-2019**



DUMPSTER PERMIT APPLICATION

Placement Dates: _____ to _____

Applicant (check appropriate box) Contractor Homeowner Business
Dumpster will be placed by : Township P/W Private Company

Name: _____ Telephone: _____

Address: _____

Emergency Contacts: (night)

Name: _____ Telephone: _____

Name: _____ Telephone: _____

Location of Dumpster: _____

An application is hereby made to permit the placement of a waste refuse container, commonly known as a roll-off dumpster or roll-off container on or along the above listed roadway.

It is agreed that any dumpster or container placed on or along the roadway shall be equipped with markers consisting of yellow reflective diamond shape panels having a minimum size of eighteen (18) inches by eighteen (18) inches. These reflective panels shall be mounted at the edge of the dumpster or container at both ends nearest the path of passing vehicles and facing the direction of oncoming traffic. These markers shall have a minimum height of three (3) feet from the bottom of the panels to the surface of the roadway. If approved, this permit shall be valid for a period of seven (7) days, and may be renewed by the approving authority for an additional seven (7) day period, but not to exceed more than thirty (30) days.

The applicant is responsible for any damage to the roadway or other property caused by the placement of the dumpster or container.

Signature of Applicant: _____ Date: _____

DO NOT WRITE BELOW THIS LINE

Approved Denied by _____

Date: _____

Justification for Denial (if applicable): _____