

PERMIT # _____

Building Permit # (if applicable) _____

Village of Tarrytown, NY
DUMPSTER/CONTAINER PERMIT APPLICATION
PERMIT VALID FOR 90 DAYS

Certificate of Insurance #: _____ Date: _____

Requested by: _____ (contractor/owner)

Work site address: _____

Property Owner's Address (if different from above): _____

Owner's
Telephone #: Day _____ Night _____ Beeper _____

Name of Contractor: _____

Contractor's Address: _____

Contractor's
Telephone #: Day _____ Night _____ Beeper _____

Dumpster/Container Site: _____

Date Dumpster will Arrive: _____ Depart: _____

Owners
Telephone #: Day _____ Night _____ Beeper _____

* Total number of days required: _____

Scope of work requiring need for permit: _____

*** MAXIMUM 5 CONSECUTIVE DAYS**

Applicant must provide the following prior to receiving approval for this permit application:

1. Certificate of Insurance required minimum insurance levels

Property Damage: \$1,000,000.00 per individual
\$1,000,000.00 per occurrence

Personal Injury: \$1,000,000.00 per individual
\$1,000,000.00 per occurrence

(over)

(over)

2. Certificate of Insurance to name the Village of Tarrytown as a co-insured.
3. A \$200.00 deposit plus \$15.00 per day charge. (Deposit to be returned after removal).
4. If a parking meter space is to be used as part of the project, cost per meter space is \$15.00 per day.

ALL APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:

1. Dumpsters shall be equipped with flashing lights attached thereto or must have barricades with flashing lights.
2. Dumpsters shall be located in an area where visibility, for both vehicular traffic and pedestrians, is not obstructed.
3. Dumpsters shall not be located in crosswalks, curves, on the crest of a hill, or in any other location that obstructs visibility for vehicular traffic and pedestrians.
4. Dumpsters shall be removed when full; this requirement shall be complied with even though short of the number of days requested.

FOR OFFICE USE ONLY:

General Foreman: _____

Approval Recommended: _____ Not Recommended: _____

Permission Granted On: _____

Amount Received: _____

cc: Police Department
Building Department