



Town of Berwyn Heights

5700 Berwyn Road
Berwyn Heights, MD 20740
Tel. (301) 474-5000
Fax (301) 474-5002

PERMIT APPLICATION FOR PLACEMENT OF A ROLL-OFF CONTAINER

Town Permit # _____

Permit Expiration Date _____

PROPERTY OWNER: _____ PHONE: _____

I hereby make application for a **Permit for Placement of a Roll-Off Container** at the following described location:

(Address)

(Lot Number and Block Number)

PLACED WHERE ON THE PROPERTY: _____

CONTRACTOR'S INFORMATION: _____

NATURE OF USE: _____

PLACEMENT DATE: _____

REMOVAL DATE: _____

CHARGE: \$25.00 FOR 1-15 DAYS ***NOTE: 60 DAYS IS THE MAXIMUM WITHOUT AN EXTENSION REQUEST**
\$250.00 deposit is required to cover any damages which may occur to Town streets.

RESPONSIBILITY: If this application for access is granted, I hereby agree to repair any damages to the existing surfaces. I furthermore agree to remove all debris and leave in a clean and orderly manner upon removal of the roll-off container.

Owner/Contractor's Signature: _____

Fee Received By: _____

Code Compliance Director's Signature: _____