

**MANHEIM TOWNSHIP, LANCASTER COUNTY, PA
APPLICATION FOR THE TEMPORARY PLACEMENT OF DUMPSTERS
AND PORTABLE STORAGE DEVICES**

*Dumpsters and Portable Storage Devices shall only be temporarily permitted on
public streets when no reasonable alternative location is available.*

PERMIT NUMBER: _____ **DATE PERMIT ISSUED:** ____/____/____

To be completed by property owner:

Property Owner: _____

Property Address: _____

Phone Number: _____ EMAIL: _____

Exact Location of Dumpster/Storage Device: _____

Purpose of Dumpster/Storage Device: _____

Dumpster Contractor: _____ Phone: _____

Permit is for a period of time not to exceed thirty (30) calendar days. All dumpsters must be removed prior to the expiration of the permit. No extension of time will be granted for this permit.

I have read the ordinance and agree to all the terms and conditions.

Property Owner signature

Date

TOWNSHIP USE ONLY

Special conditions or instructions: _____

Approved _____

Denied _____

Reason Denied: _____

Township Official

Date

FEE IS NON-REFUNDABLE