



OFFICE USE ONLY	
Date Application Received:	
Permit Number:	Fee: \$100.00
Payment Info:	

DEPARTMENT OF BUILDINGS

376 ATLANTIC AVENUE • PO Box 189 • EAST ROCKAWAY NY 11518
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DUMPSTER PERMIT APPLICATION

Information contained herein may be investigated and verified. Any false statement will be cause for refusal and revocation of this permit. It is further understood that applicant will conform and adhere to all laws applicable, and such rules and regulations as may be promulgated by the Incorporated Village of East Rockaway regulating and relating to the use to which this permit is applicable.

Fee: • **\$100 for up to 30 days for dumpsters.**

OWNERS NAME: _____ TEL#/EMAIL: _____

OWNER ADDRESS: _____

ZONE: _____ VILLAGE SECTION: _____ VILLAGE BLOCK: _____ VILLAGE LOT(S): _____

COMPANY SUPPLYING DUMPSEER: _____

COMPANY'S ADDRESS: _____

LOCATION WHERE DUMPSTER WILL BE PLACED: _____

ESTIMATED START DATE: _____ ESTIMATED END DATE: _____

IMPORTANT: DUMPSTERS ARE PROHIBITED FROM BEING PLACED ON ANY ROADWAYS.

_____, states that he/she is authorized to make this application and that all statements are true to the best of his/her knowledge and belief. (If corporation, give name of corporation and name, office, and address of its responsible officers).

I hereby apply for a permit for a dumpster to be placed on at the above listed location, I agree to strictly comply with all the terms, provisions and conditions of Chapter 128 of the Code of the Incorporated Village of East Rockaway, entitled "Dumpsters"; a Code to regulate, control and prescribe the method and manner of placement and maintenance of container, materials or scaffold in the Village of East Rockaway, Nassau County, New York.

Signature of Applicant

Date