VILLAGE OF LOCKLAND

Dumpster Permit

Name / Organization: ________________________________________________________________

Address of requester: ______________________________________________________________

Phone number of Requester: __________________________________________________________

Date of request: __________ for Date(s) ______________________________________________

Location: _____________________________________________________________

_____________________________________________________________________________

Purpose of request: _______________________________________________________________

_____________________________________________________________________________

Dumpsters must be highly marked with DOT tape and cones at all times. Dumpsters may not block
street to a point that traffic cannot drive around it. You may not block driveways, sidewalks, fire
hydrants, and emergency water valves in street.

This permit must have signature of all Department Heads or their authorized representative for approval.

Police Chief: ________________________________________________________________

Fire Chief: ________________________________________________________________

Public Works: ________________________________________________________________