MILLERSTOWN BOROUGH 44 North High Street Millerstown, PA 17062 Phone: (717) 589-3738 Fax: (717) 589-3738

## DUMPSTER/PORTABLE STORAGE CONTAINER (PSC) APPLICATION

[	PROPER	TY INFORMAT	ION	
Property Address:		Zoning	District:	Ward:
Location of Work (	space, floor, su	ite, etc.): _		
Parcel #:				
Owner's Name:			Email:	
Address:			Phone:	
City:				
Fax:				
DUMPST:	ER 🗆	PSC	D DUMPST	ER & PSC
Location of Dumpste	er/PSC (if placed	d in the road	, please incl	ude a map
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indicating the loca	-	t will be pla	ced):	
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indicating the loca Name: Address: City:	Applicant	ANT INFORMA Ema Pho Zip:	FION il: me: Fax:	

your application to be returned. 2. Submit a survey or plot plan indicating the location of the portable storage unit or dumpster if other than a driveway.

3. Remit the appropriate fee. (To be determined by Code Official)

	DO	NOT	WRITE	BELOW	TH	HIS LINE -	- BORG	DUGH	USE	ONL	Y
Portable						dumpster					
Permit #:							Fee	; \$			
Invoice #	<b>:</b>						Cheo	ck #	:		
Approved	by	:					Date	e:			

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