

**Town of Wakefield
Board of Health
William J. Lee Memorial Town Hall
One Lafayette Street
Wakefield, MA. 01880
Tel. (781) 246-6375 Fax. (781) 224-5018**



Application for Dumpster (Temporary – 90-Days) Permit
Permit Fee: **\$30.00**

(Please Print)

Location of Dumpster: _____
Name of business and/or residence street address

Owner of Property at that location: _____
Name Tel. No.

Name of Permit Applicant: _____

Address of Applicant: _____ Tel. No. _____

Reason for Dumpster: _____

Anticipated length of time dumpster will be on site: _____

Name, Address & Tel. No. of dumpster hauler: _____

Is the name & tel. no. of Hauler Company affixed to the exterior of the dumpster container? YES _____ NO _____

How often is the dumpster contracted to be emptied? _____

What is the capacity of this dumpster? _____ Yards

Does this dumpster have a lid for closing? YES _____ NO _____

Attach a map on an 8 ½ x 11 sheet, showing distances to lot lines, where the container will be located on the property.

(Location of the dumpster must be approved by Health Dept. before the permit will be issued.)

Approved Hours:

- 1. Dumpster is not to be filled between 11 p.m. and 6 a.m.**
- 2. Dumpster is not to be emptied after 9 p.m. or before 6 a.m., except in areas of the Town zoned for business, commercial or industrial use**