

Borough of Marion Heights
224-226 North St
Marion Heights, PA 17832
570-373-1042

Dumpster Permit Application

Applicant Name: (please print) _____

Address: _____

Cell #: _____ Email: _____

Name of Hauler: _____

Reason for Dumpster: _____

*Any construction project requires additional Borough Permit

Location of Dumpster: _____

Date Dumpster will be dropped off: _____

Date Dumpster will be picked up: _____

FEE: \$10 per week (not to exceed 6 weeks)

Total Fee: _____ **Payment Type:** **Cash** **Check #:** _____
(Check Payable to Marion Heights Borough)

Return application and payment to Borough Office PRIOR to delivery date

I understand the dumpster shall be maintained in a sanitary condition and covered at the conclusion of each day. Exposed side of the dumpster closest to the traffic lane shall have reflectors, reflector tape or safety cone to alert oncoming traffic.

Signature of Applicant

Date