



BUILDING DEPARTMENT

**VILLAGE OF CATSKILL**

422 MAIN STREET  
 CATSKILL, NY 12414  
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FROM THE OFFICE OF  
 MICHAEL RAGAINI

CODE ENFORCEMENT OFFICER  
 BUILDING INSPECTOR

NEW YORK STATE:  
 BUILDING CONSTRUCTION CODE  
 MULTIPLE RESIDENCE LAW  
 ENERGY CODE

**DUMPSTER APPLICATION**

1. NAME OF LICENSEE (BUSINESS)	2. PERSON RESPONSIBLE (IF NOT LICENSEE)	TELEPHONE NUMBER
3. LOCATION OF LICENSED ACTIVITY	4. BUSINESS (BILLING) ADDRESS (IF DIFFERENT FROM LOCATION)	
5. TYPE OF BUSINESS		
<b>6. LICENSE TYPE</b>	<b>FEE</b>	<b>EXPIRATION DATE</b>
DUMPSTER PERMIT ( _____ PER DUMPSTER (S) @ \$30.00 FIRST FIFTEEN DAYS)		
DUMPSTER PERMIT ( _____ PER DUMPSTER (S) @ \$ 5.00 AFTER FIRST FIFTEEN DAYS)		
7. SIZE OF DUMPSTER (S)  _____ (L) x _____ (W) x _____ (H)  _____ (L) x _____ (W) x _____ (H)		
8. INFORMATION REGARDING DUMPSTER LOCATION:  A) Where is (are) the dumpster (s) located? Please mark the number of dumpsters located at each area. [ ] on sidewalk            [ ] in alley            [ ] in driveway    [ ] other _____  B) If you have a dumpster on sidewalk, please fill in the following: 1) The dumpster is located on _____ St. between _____ St. _____ St. It is _____ feet from the curb line of _____ St. (street on which dumpster is located), _____ feet from the curb line of _____ St. and nearest street intersection.		

**9. APPLICANT CERTIFICATION**

*I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement herein I am subject to possible revocation of any license issued as a result of my false application and such other penalties as may be prescribed by law.*

*Applicant's signature*

*Date*

**FOR OFFICE USE ONLY:**

APPROVED

TAX Map #

\_\_\_\_\_

REFUSED

Permit #

\_\_\_\_\_

SIGNATURE:

DATE :

CODE ENFORCEMENT OFFICER

MONTH / DAY / YEAR