



TOWN OF NORTHBRIDGE
BOARD OF HEALTH

Aldrich School Town Hall Annex - 14 Hill Street
Whitinsville, MA 01588
Phone (508) 234-3272 Fax (508) 234-0821

APPLICATION FOR DUMPSTER PERMIT

FEES: Temporary – 30 Day Dumpster: \$25.00

Annual Dumpster: \$150.00 (Annual Permits expire December 31st of the year issued)

Application is hereby made for a permit to maintain a dumpster on property, as listed below, in accordance with the Rules and Regulations of the Northbridge Board of Health.

Company Name and Address: _____

Contact Person: _____ Email: _____

Phone Number: _____ Fax: _____

Location at which contents of dumpster will be deposited: _____

Proposed Location of Dumpster (for *Temporary* Permits ONLY):

Street Address: _____

Owner of property: _____ Phone Number: _____

Check whether permit is for: () Residential Use () Commercial Use

Dumpster Capacity/Size: _____

Please sketch on back of permit application an outline of the property, showing the proposed location of dumpster. Give distances from dumpster to other buildings and to lot lines.

Signature of Applicant

Date

MASSACHUSETTS DEPARTMENT OF REVENUE
REVENUE ENFORCEMENT AND PROTECTION (REAP) ATTESTATION

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under the law.

*Signature of Individual *or* Corporate Name (Mandatory)

By: Corporate Officer (Mandatory, If Applicable)

**Federal Identification Number OR Social Security Number

* This license will not be issued unless this certification clause is signed by the applicant.

** Your Social Security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Massachusetts General Law C. 62C s. 49A.