



City of Saratoga Springs Dumpster / ROW Use Permit Application

Please fill out & return with permit fee to:
Code Administration
 5 Lake Ave. Ste 5A
 Saratoga Springs NY 12866
 (518) 587-3550 x 2632

Applicant's Name _____

Applicant's Phone # _____ Applicant's Emergency Phone # _____

Applicant's Return fax #: _____ Applicant's Email _____

Fill this section out for Dumpster / Storage Container

Dumpster / Storage container on private property?

Dumpster / Storage container in City Right of Way

If yes must complete Right of Way Use Section Below

Time period : Annual \$175.00 (renewed annually) 3 Months or more \$ 5.00 per month 3 Months or less No Charge

Placement Date ____/____/____ Removal Date ____/____/____ **Total Fees Due:** _____

Number of Dumpster / Storage container _____ Dumpster / Storage container contents _____

Placement Address: _____

Property Owner's Name: _____

Mailing Address: _____ Phone #: _____

Company Supplying Container: _____ Phone #: _____

Fill this section out for Right of Way Use Permit

Material or Equipment placed in the Right of Way? _____

Type of Work being done: _____

Building Permit: Yes _____ # _____ No _____

Check boxes that apply

Will sidewalk be blocked? : Yes No

Will area of road used for parking vehicles be used? Yes No

Will area of road used for driving vehicles be used? Yes No

Will the entire road need to be blocked? Yes No

Number of parking areas requested? _____
 One Lane Two Lanes

Placement Date ____/____/____ Removal Date ____/____/____

Permit Fees: 1 – 7 Days \$75.00 8 – 30 Days \$150.00 Each additional day over 30 days \$10.00 per day

Total Fees Due: _____

Placement Address: _____

Property Owner's Name: _____ Phone #: _____

Equipment Owners Name: _____ Equipment Owners Phone #: _____

Safety Equipment Required: _____

Approved by CEO: _____

Date: _____