



OSWEGO CODE ENFORCEMENT DEPARTMENT

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**APPLICATION FOR PERMANENT DUMPSTER PERMIT**

**Biennial (2 Years) Permit Fee: \$100.00**

**Please return payment with completed application**

**Check Payable to: City of Oswego**

Permit #: \_\_\_\_\_

Business Name: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Address: \_\_\_\_\_ City/St/Zip: \_\_\_\_\_

Local Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Ward: \_\_\_\_\_ Tax Map Number: \_\_\_\_\_ Zoning District: \_\_\_\_\_

I hereby apply for a dumpster Permit pursuant to Section 249-7 of the City of Oswego Code as follows:

Dimensions of Dumpster Enclosure on 4" Pad: \_\_\_\_\_

Distance of Dumpster Enclosure from Property Line: \_\_\_\_\_

Type of 6' High Opaque Screening Enclosure: \_\_\_\_\_

Site Plan Showing Location of Dumpster Enclosure on Property: Yes \_\_\_\_\_ No \_\_\_\_\_

Issue Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

**DECLARATION:**

I declare that the statements made in this application (including information on accompanying site plan) have been examined by me and to the best of my knowledge and belief, are true and correct.

I understand that the Dumpster Permit shall be issued biennially and the City of Oswego may revoke the permit for good cause.

I further understand that various city officials will be inspecting the placement of the dumpster and enclosure in performance of their official duties.

Applicant's Signature \_\_\_\_\_

Date

Approved by:

Approved by:

\_\_\_\_\_  
Zoning Administrator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Code Department Official

\_\_\_\_\_  
Date