



OSWEGO CODE ENFORCEMENT DEPARTMENT

WILLIAM J. BARLOW, JR. MAYOR

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CITY HALL - THIRD FLOOR

13 WEST ONEIDA STREET

OSWEGO, NY 13126

CODE FAX: (315) 342-1320

WWW.OSWEGONY.ORG

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 ID 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