



Aston Township Dumpster/POD/Storage Container Permit

2 New Road, Suite 123, Phone 610-494-0384, Fax 610-494-8853

Dumpster/POD/Storage Container

\$54.00 Fee

Date of Application _____ Permit # _____ Folio # _____

Property Owner: _____ Mailing Address/City _____

Phone: _____ E-mail: _____

Job Site Address _____

Dumpster Company _____ Address/City _____

Phone: _____ Contractor License Number: _____ Certificate of Insurance: _____

Reason for Storage Container: _____

Type of Materials to be Placed in Container: _____

Check One: Dumpster _____ POD _____ Storage Container _____

Container Area Sq. Ft. _____

Date Container Dropped Off _____ Date Container Picked Up _____

48 Hour Notice Required To Schedule Individual Required Inspections

Under penalty of intentional misrepresentation and/or perjury, I declare that I have examined and/or made this application and is true and correct to the best of my knowledge and belief. I agree to construct said improvement in compliance with all provisions of the ordinances of the Township of Aston and all applicable Building Codes. I realize that the information that I have stated herein, forms a basis for the issuance of the building permit herein applied for and approval of any plans in connection therewith shall not be construed to permit any construction upon said premises or use thereof in violation of any provision of the UCC therewith. Where no work has been started within 180 days after the issuance of a permit or when more than 180 days lapses between approval of required inspections, such permit shall be void. I hereby certify that I am the owner at this address or that, for the purpose of obtaining this approval, I am acting on behalf of the owner. All contract work on this project will be done by a contractor holding valid Pa. Contractor License.

Signature of Owner/Representative

Signature of Contractor

Do Not Use, Department Use Only

Township Permit Fee _____

Pa. U.C.C. Surcharge _____ \$

Total Permit Fees _____

Check # _____ Money Order _____

Permit Issued Date _____ Zoning Approval _____

Building Code Official: _____

Approval Date: _____