City of Medford
Board of Health
85 George P. Hassett Dr.
Medford, MA. 02155
Tel#: (781) 393-2560 Fax: (781) 393-2562

Application for a Temporary Dumpster Permit for Trash Disposal

Fee: $50.00 (permit valid for 30 days) Permit must be placed in window so it can be seen

Location Type:  ☐ Residential ☐ Commercial ☐ Food Establishment
Project Type:  ☐ Demolition ☐ Renovation ☐ New Construction ☐ Other__________

Include:  ☐ Application & Application Fee of $50.00
☐ Copy of Building Permit (if applicable)

Description of Work: __________________________________________________________

Dumpster Location: ____________________________________________________________

Delivery date of dumpster: ________________ Removal Date: ________________

Property Owner:
Name: __________________________________________ Telephone #:________________________
Address: __________________________________________________________________________

Owner, Manager, or Agent responsible for the operation and contracting with rubbish hauler:
Name: __________________________________________ Telephone #:________________________
Home Address: __________________________________ EMAIL ____________________________

Name of Rubbish Hauler providing service: (PLEASE MAKE SURE HAULER IS LICENSED IN CITY OF MEDFORD) ASK FOR LIST
Hauler Company: __________________________ Telephone #:________________________

Dumpster size (in cubic feet): __________________________

How many times a week is it emptied _______________ what days? __________________________

Dumpster site is enclosed:  ☐ Yes ☐ No

I will maintain the dumpster in compliance with all regulations, and in a clean and sanitary manner. Signed under the pains & penalties of perjury.

Signature of Owner, Manager, or Agent________________________________________

Date: ____________________________