City of Bellevue

616 Poplar Street, 41073, (859) 431-8866, FAX (859) 261-8387

Dumpster Permit Application

TYPE: (Check all that apply) ___**TEMPORARY STORAGE UNIT** ___**DUMPSTER**

1. Property Address:_____

2. Property Owner:_____
   Address:_____Phone:_____

3. Building Permit Required for project: ___**YES** _____**NO** Building Permit Number:_____

4. Contractor:_____
   Phone:_____Bellevue Occupational License #:_____

5. Dates of Delivery:_____ Date of Removal:_____

6. Purpose of Request:_____

7. Device must be removed or application for extension must be submitted within the following number of days to this office:
   - **A) Without Permit or Development Plan: 7 Days**
   - **B) With approved Building Permit: 90 Days**
   - **C) With approved Development Plan: 180 Days**

8. The owner of this property and undersigned do hereby certify that the information and statements given on this application, drawings, and specifications are to the best of their knowledge, true and correct.

   Signature of Applicant_____Title:_____

   Address:_____Date:_____

   E-mail Address: _____

DO NOT WRITE BELOW THIS LINE [OFFICE USE]

Fee:___$20_____

Approved:_____ Conditions attached: YES:____ NO:____ Denied:_____

_____
Zoning Administrator Date

REQUEST FOR EXTENSION:
Date Submitted:_____Requested By:_____
Extension #1 approved through:_____Approved By:_____
Extension #2 approved through:_____Approved By:_____