

Town of Dickinson

Town Hall/531 Old Front Street, Binghamton, NY 13905

Dumping Permit Application

Permit Number _____

Permit term: 6 months _____

APPLICATION IS HEREBY MADE FOR PERMISSION

Extension _____

Location: _____

House number

Street

City/Town

OWNER _____ **Phone #** _____

ADDRESS _____

CONTRACTOR:

Permit Fee \$ _____

SILT FENCE IS REQUIRED IF MORE THAN ONE ACRE

ALL WORK SHALL BE DONE IN ACCORDANCE WITH ALL THE APPLICABLE LAWS AND REGULATIONS AND IN ACCORDANCE WITH THE PLANS SUBMITTED HEREWITH.

Applicants Signature

PERMIT IS: GRANTED

DENIED

Date

Inspector

ADDITONAL REMARKS:

SIGNATURE _____