



BOARD OF HEALTH

78 Main Street, Hudson, Massachusetts 01749

Phone (978) 562-2020

Fax (978) 562-8508

Temporary Dumpster Permit Application

Property Address	
Property or Business Owner	

✓	Category (please check one)	Permit Fee
	Temporary Dumpster for Initial 30 Days	\$10
	Temporary Dumpster for Additional 30 Days	\$10

Applicant (if different from Property/Business Owner)	
Mailing Address (if different from Property Address)	
Business Phone	
24-hour Emergency Phone	
Applicant email Address	
Trash Company Servicing the Dumpster	

Please note that if your dumpster is located within Zone II of Water Supply Protection Areas, as defined by the Massachusetts Department of Environmental Protection, your dumpster must be placed on an impervious surface. See attached list of addresses located within Zone II.

Pursuant to Massachusetts General Law Chapter 62C, Section 49A, I certify under the pains and penalties for perjury that I, to the best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

Signature of Applicant	
Date	