

Application for Collection Box Permit

The following form and required information must be completed for any person wishing to obtain a Permit to place, operate, maintain or allow any Collection Box on any real property within the Town of Middletown.

APPLICANT INFORMATION		
Name (refer to note below):	Company/Organization:	
Street Address:		
Town:	State:	Zip Code:
E-mail address:		
Street address of Collection Box location:		
Is a scaled drawing that shows the proposed site location, verification that another Collection Box is not located within 1,000 feet and dimensions of each Collection Box attached to this application?		
<input type="checkbox"/> Yes <input type="checkbox"/> No If no, the information must be attached before the application is submitted.		
If the Applicant is not the owner of the real property where the Collection Box will be located, is the completed owner affidavit form attached?		
<input type="checkbox"/> Yes <input type="checkbox"/> No If no, the information must be attached before the application is submitted.		
Is the Permit review fee for each location (\$ <u>100.00</u> for a new Permit or \$ <u>100.00</u> for Permit renewal) enclosed with this application?		
<input type="checkbox"/> Yes <input type="checkbox"/> No If no, the fee must be provided at the time the application is submitted.		
CONTACT INFORMATION		
(For all matters relating to the Collection Box in the Town)		
Contact Name:	Contact telephone:	
	Contact e-mail address:	
Contact street address:		
Town:	State:	Zip Code:
The Permit is valid for the period beginning on _____ and expiring on June 30, _____. Prior to expiration of the Permit, the Permittee may voluntarily cancel the Permit by providing written notification to the Middletown Building Department. Otherwise, the Collection Box Permit must be renewed annually and must be filed with the Middletown Building Department no later than thirty (30) days before the Permit expires. If the Permit expires and is not renewed, the Collection Box(es) must be removed within ten (10) days after expiration of the Permit.		
Signature of Applicant:	Printed Name of Applicant:	
Date:		

