

BLAIRSVILLE MUNICIPAL AUTHORITY

203 EAST MARKET STREET
BLAIRSVILLE, PA 15717

MICHAEL WITHEREL
Solicitor

TIMOTHY EVANS
Authority Manager

RANDY KRAUSE
Engineer

KENNETH SMITH
Asst. Treasurer/Secretary

JUSTIN FRIDLEY
Vice-Chairman

PAUL FODOR
Chairman

MICHAEL RITTS
Treasurer

PATRICIA EVANKO
Secretary

PHONE: (724) 459-5020
FAX: (724) 459-9485

DUMPSTER PERMIT REQUEST FORM

- Two-yard dumpsters are available for residential use
- The rate is \$75.00 for a two-week period
This price includes one pick up
- The dumpster will automatically be removed after the two-week period
- Should you need the dumpster emptied prior to the two-week period ending, the fee is \$25.00 per pick up
- If you would like an extension after the two-week period, you must call the office to retain the dumpster
- There will be an additional \$25.00 fee for each week you retain the dumpster and a \$25.00 fee for each pick up

THE FOLLOWING ITEMS MAY **NOT** BE PLACED IN THE DUMPSTER:

- CEMENT PRODUCTS
- PROPANE/HELIUM TANKS
- TELEVISIONS
- AIR CONDITIONERS
- COMPUTERS/MONITORS/ELECTRONICS
- TIRES
- CAR BATTERIES/PAINT CANS
- MOTOR PARTS/OIL/SOLVENTS
- YARD WASTE- GRASS CLIPPINGS/LEAVES/STICKS

_____ Customer Initials

_____ BMA Representative

Billing Information:

Name _____

Address _____

Home Phone _____

Work Phone _____

Cell Phone _____

Email address _____

Service Information (where the dumpster is to be delivered)

Name _____

Address _____

Special Instructions _____

I have read, understand and will adhere to the policies and procedures relating to the Blairsville Municipal Authorities Residential Dumpster Service. I understand that any violation of these policies and procedures could result in removal of the dumpster from my residents and additional charges applied to my account. Failure to pay this account in the normal 30-day billing cycle may result in my account being charged penalties and interest. I further agree to pay any amounts due and owing pursuing to this agreement, and those that may be assessed for my failure to comply

By signing and initialing this agreement, I also hereby acknowledge that I have received a copy of this agreement, and that the Blairsville Municipal Authority will maintain a signed and initial copy of this agreement.

Service will not begin until this form is completed in full and received by the Blairsville Municipal Authority.

Signature _____

_____ Customer Initials

_____ BMA Representative

[EXECUTED IN DUPLICATE]