



Code Enforcement Department  
Borough of Highlands  
171 Bay Avenue  
07732  
Phone (732)872-1224 x215  
Fax (732)872-0670

# Container Permit

## Building and Contractor Information

Building Address: \_\_\_\_\_  
Building Owner Name: \_\_\_\_\_ Building Owner Phone: \_\_\_\_\_  
Contractor Name: \_\_\_\_\_  
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone # \_\_\_\_\_

## Container Company Information

Name: \_\_\_\_\_  
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone # \_\_\_\_\_

Container Type  Construction Dumpster  POD(storage) Size: \_\_\_\_\_  
Check one

Location: \_\_\_\_\_ Container Set Date \_\_\_\_\_ Container Removal Date \_\_\_\_\_

By signing this form I agree to abide by all rules and regulations set forth by the Borough of Highlands, New Jersey.

Signature: \_\_\_\_\_

## Borough Hall Use Only

Fee Due \$ 20.00 Fee Received \$ \_\_\_\_\_  Cash  Check# \_\_\_\_\_

Collected By \_\_\_\_\_ Date \_\_\_\_\_

**CODE ENFORCEMENT:** Date \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Reason: \_\_\_\_\_

Signature: \_\_\_\_\_

**POLICE DEPARTMENT:** Date \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Reason: \_\_\_\_\_

Signature: \_\_\_\_\_