



Borough of Highlands  
42 Shore Drive, Highlands, NJ 07732  
Phone: 732-872-1224  
Fax: 732-872-0670

# Container Permit

Building and Contractor Information	
Building address: _____	
Building Owner: _____	Building Owner Phone: _____
Contractor Name: _____	
Street: _____	City: _____ State: _____ Zip: _____
Phone # _____	
Container Company Information	
Name: _____	
Street: _____	City: _____ State: _____ Zip: _____
Phone # _____	
Container Type	<input type="checkbox"/> Construction Dumpster <input type="checkbox"/> POD (storage)    Size: _____
Location: <input type="checkbox"/> Street _____	Container Set Date _____ Container Removal Date _____
<input type="checkbox"/> Property _____	

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 <b>\$30.00</b>	Fee Received \$ _____ <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____
Collected By _____	Date _____
<b>CODE ENFORCEMENT:</b>	Date _____
Approved: _____	Denied: _____ Reason: _____
Signature: _____	
<b>POLICE DEPARTMENT:</b>	Date _____
Approved: _____	Denied: _____ Reason: _____
Signature: _____	