

INC. VILLAGE OF WILLISTON PARK  
494 WILLIS AVENUE  
WILLISTON PARK, NY 11596

APPLICATION FOR ROLL-OFF CONTAINER AND/OR  
DUMPSTER LICENSE

CALENDAR YEAR - \_\_\_\_\_

\*\*\*\*\*

LICENSE NUMBER \_\_\_\_\_

DATE ISSUED \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

RESIDENCE ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

PLEASE ATTACH THE FOLLOWING **Insurance Requirements:**

BODILY INJURY in the amount of not less than \$500,000

PROPERTY DAMAGE in the amount of not less than \$100,000.

NO LICENSE will be accepted without the above Certificates on file.

I SOLEMNLY SWEAR TO THE TRUTH OF THE ABOVE STATEMENTS.

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Signature of Applicant