



CONSTRUCTION OFFICE 856-783-6320 EXT. 1500

DUMPSTER PERMISSION

STATE STATUTE #27:5B-1

DATE RECEIVED _____ **#** _____

OWNERS NAME _____

ADDRESS _____

PHONE _____

DUMPSTER COMPANY _____

ADDRESS _____

CONTACT PERSON _____

PHONE _____

REASON FOR DUMPSTER _____

PERMISSION GIVING DATE _____ **TO DATE** _____

Markers consisting of all yellow reflective diamond-shaped panels having a minimum size of 18 inches. These shall be mounted at the edge of the dumpster or container at both ends nearest the path of passing vehicles and facing the direction of oncoming traffic. These markers shall have a minimum mounting height of three feet from the bottom of the panels to the surface of the roadway.

SIGNATURE _____

**Traffic Controls for Street and Highway
Construction and Maintenance Operations**

Authority B.O. 247-59/M.U.T.C.D.



I. Preconstruction meeting.

A preconstruction meeting will not be necessary if doing routine short-term stationary maintenance. However, any excavating, in or on the highway/roadway, a preconstruction meeting is mandatory.

If approved, this form may be used in lieu of a formal preconstruction meeting.

Company: _____

Address: _____

Phone Number: _____ E-mail: _____

Name of official completing request: (Print) _____

1. Are you familiar with Somerdale Borough Ordinance 247-59? ☐ YES ☐ NO
If no, call 428-6324 (Monday-Friday 9am to 3pm) for a copy.

2. Are you familiar with Part 6 of the Manual of Uniform Traffic Control Devices (M.U.T.C.D.)? ☐ YES ☐ NO
If no, call 428-6324 (Monday-Friday 9am to 3pm) for a copy.

DO NOT CONTINUE FURTHER, UNTIL #1 AND #2 are YES - ANSWERS.

3 Is there going to be excavating of the Highway/Roadway? ☐ YES ☐ NO
If yes, a police officer or officer(s) are required if on State or County Highway or within 50 feet of a intersection on a Municipal Highway/Roadway.

4. Are you closing a highway/roadway or detouring, traffic? ☐ YES ☐ NO
If yes, at least one police officer is required.

5. Location of construction or maintenance: _____

6. Number of days at this location _____

Two Emergency Names and telephone numbers/e-mail:

1. _____

2. _____

7. Hours of operation. _____

Adjustment of hours Approved: _____

Chief of Police or Designee

I hereby certify, that I am fully aware of the requirements of the Borough of Somerdale and contents of Part 6 of the Manual of Traffic Control Devices (M.U.T.C.D. and affirm that I will adhere to all provisions.

Signature of Requestor: _____ Date _____

Approved: _____ Date _____

Chief of Police or Designee

* If you would like copies of 247-59 and Part 6 of MUTCD - please check here ☐ and an official will e-mail them to the E-mail address you provided.