USE OF PUBLIC RIGHT-OF-WAY APPLICATION (Temporary Dumpster)

301-759-6442 • Fax 301-759-6432 • debbie.helmstetter@cumberlandmd.gov

The purpose of this application is to temporarily request blocking a public right of way. Please note that the application must be submitted 72 hours prior to the requested date of placement and subject to approval.

Project Location	Tax ID #
Provide property tax number for property or split pr Real Property Search.) When construction is being d	roperty. (This can be found on your deed or by visiting www.dat.state.md.us / Real Property / lone and several property account numbers are involved, properties must be combined contact the State of Maryland Assessment Office, 112 Baltimore Street, Gateway Center,
Property Owner Name	Phone
Address	Email
Applicant/Contact Name	Phone
Address	Email
Placement location at property	
What is being placed (e.g. 30 yd. container, event, etc.) in the Public Right-of-Way?	
of Way is needed. If a site plan showing the attached, the application is considered income	location at property where Temporary Dumpster and/or Use of Public Right he right of way proposed to be blocked and the adjacent property is not complete. Removal Date/Time
A minimum of four (4) full business days is	needed for this application to be reviewed. Allow more time if 'No Parking' equired to be posted 24 hours before placement date.
No permit fee required.	
A signed, 'approved' and st	Vay until an approval is received from the City of Cumberland. amped form is required for application to be considered complete. val of the Code Enforcement Manager or his/her designated representative.
Applicant is to provide traffic so	afety cones (or some warning device) at both ends of any dumpster
	mmunity Development Manager (or representative) in case the building or its ons relating to building privileges and as stated on this document.
	all regulations which are applicable hereto, and further agree that the application and that this structure shall not be used for any other purposes.
Applicant Signature:	Date:
Approved:	Date

Code Enforcement Manager (or representative)