

Date Received: _____

APPEAL TO ORDINANCE #2350

*Multi-Family Dwellings of 4 units or more are required to Contract with a
Third Party Trash and Recycling Service*

Property Owner's Name: _____

Mailing Address: _____ Phone: _____

Property Address being Appealed _____ # of Units _____

Reason for appeal: _____

(Attach additional pages if necessary.)

Documentation from Vendor

Name of Vendor: _____

Documentation Attached: _____ Yes _____ No

Borough Use ONLY

Field Inspection By: _____

Field Inspection Date: _____

Field Inspection Recommendation: _____

Borough Manager Review Date: _____

Borough Manager: _____ Approval _____ Denial

Borough Manager Signature: _____

Susan D. Armstrong, Borough Manager