

# TOWN OF BEL AIR



DEPARTMENTS OF PLANNING AND PUBLIC WORKS  
705 CHURCHVILLE ROAD  
BEL AIR, MARYLAND 21014

PLANNING 410-879-9500  
PUBLIC WORKS 410-879-9507  
FAX 410-838-0775

## BOARD OF COMMISSIONERS

Paula S. Etting  
Steven T. Chizmar  
Jakob D. Taylor  
Gavin Hanley

Small Roll Off  
10 yd (8 W x 12 L x 4 H)

## TOWN RESIDENTS:

All debris resulting from work performed by hire licensed home improvement contractors – must be removed by the contractor  
**I ACKNOWLEDGE THAT NO CONTRACTOR HAS BEEN HIRED TO PERFORM THE WORK,  
AND I DO NOT CURRENTLY HOLD ACTIVE PERMITS WITH THE TOWN OF BEL AIR**

Also, I hold Town harmless of any damage to personal property as result of placing Town vehicle in driveway.

The following list contains all materials that are **NON-ACCEPTABLE** for the Town roll off:

- |  |                                |
|--|--------------------------------|
| 4 DIRT   | 4 FOOD                         |
| 4 ROCKS/BOULDERS   | 4 APPLIANCES                   |
| 4 HOUSEHOLD GARBAGE  | 4 LIQUIDS                      |
| 4 STUMPS – OVER 6”   | 4 CONCRETE                     |
| 4 DRUMS  | 4 CLOSED CONTAINERS            |
| 4 INSULATION   | 4 TAR OR TAR CONTAINERS        |
| 4 TIRES  | 4 MORE THAN 10% PAPER PER LOAD |
| 4 NO MATTRESSES/BOX SPRINGS  | 4 CREOSOTED RAILROAD TIES      |
| 4 CLOTHING OR RAGS   | 4 FIBERGLASS TANKS             |
| 4 AUTOMOBILES OR THEIR PARTS   | 4 BOATS                        |
| 4 ANIMAL CARCASSES   | 4 SEWAGE OR SEPTAGE            |
| 4 INCINERATOR ASH  | 4 FUEL TANKS OR CONTAINERS     |
| 4 BURNED MATERIALS   | 4 SAND, BLASTING SAND          |
| 4 PAINT, CAULK, GLAZING, PAINT THINNER, CARPET CEMENT, CREOSOTE OR THEIR CONTAINERS. |                                |

### **NO YARDWASTE MIXED WITH OTHER MATERIALS**

All items placed in the roll off must be of **SAME MATERIAL**.

Please read the above carefully and sign below agreeing **NOT** to deposit **NON-ACCEPTABLE MATERIAL** in the Town Roll Off of which is being provided to you.

## I HEREBY AGREE TO THE ABOVE TERMS:

\_\_\_\_\_  
Signature of Town Resident

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Date Reserved (**Dropped off Friday, picked up Monday**)

\_\_\_\_\_  
Describe Material to be deposited in Roll Off

PLEASE INDICATE LOCATION OF DUMPSTER:

on street

in driveway

**DO NOT FILL ABOVE TOP OF CONTAINER  
PLEASE DO NOT BLOCK DUMPSTER FOR PICKUP**