

Dumpster Permit Information

Dumpster Permits

Permits are required, per 527 CMR 19.1 of the Massachusetts Fire Prevention Regulations to have a dumpster 6 cubic yards or more in the Hyannis Fire District. The permit is required to be obtained by the property or building owner, lessee, or refuse generator. Permits are not required for dumpsters which are delivered to a location and removed during a single business day.

An inspector from the Fire Prevention Division may come and inspect your dumpster permit compliance at any time. Below are some items that are required and will be reviewed upon inspection:

1. The Dumpster is at least **10 feet** away from the building
2. The Dumpster is not an obstacle to egress
3. The Dumpster would not obstruct Fire Rescue Department operations during a fire or other emergency.
4. The Dumpster shall be marked with the name and telephone number of the company who can be reached in an emergency.

The cost of the permit is \$25.00 and it is available in person, or online at www.hyannisfire.org.

You must attach a basic layout of dumpster location. The hours of the Fire Prevention Division are from 7:30am to 6:00 pm Monday through Friday. Please call (508) 775-1300 Option 2 with any questions, or to make payment over the phone. You may also email us at fireprevention@hyannisfire.org.



The Commonwealth of Massachusetts

City/Town of _____



Application for Standard Permit

FP-006 (Rev. 1.2018)

Return completed application to: _____

Permit Number: _____

City or Town: _____

Date: _____

DIG SAFE NUMBER

Start Date: _____

In accordance with the provisions of M.G.L. Chapter 148, as provided in Section _____ application is hereby made by _____ (Full Name of Person, Firm or Corporation) _____ (Phone Number)

of _____ (Address: Street or P.O. Box, City or Town, Zip Code)

for permission to (state clearly purpose for which permit is requested) _____

Name of Competent Operator (if applicable) _____ Cert. No. _____

Date Issued-rejected _____ By _____ (Signature of Applicant)

Date of expiration _____ Fee _____ Amount Paid \$ _____

Handwritten mark



The Commonwealth of Massachusetts

City/Town of _____



FP-006 (Rev. 1..2018)

PERMIT

City or Town: _____

Date: _____

Permit Number (if applicable): _____

DIG SAFE NUMBER

Start Date: _____

In accordance with the provisions of M.G.L. Chapter 148, as provided in _____ this permit is granted to _____ (Full Name of Person, Firm or Corporation)

for _____

Restrictions: _____

at _____ (Street and # or Describe Location for Adequate Identification)

Fee Paid \$ _____ This permit will expire on _____

Signature of Official Granting Permit: _____ Title _____

This permit must be conspicuously posted upon the premises